

# **Ann Arbor YMCA**

## **Financial Assistance Program**

The Ann Arbor YMCA is more than a building and belonging is more than purchasing a membership.

The YMCA believes that every person should have an opportunity to participate and pursue their own personal goals regardless of skill or financial level.

Financial assistance is available for those unable to afford the full membership fees.



**YMCA**

**We build strong kids,  
strong families, strong communities.**

**[www.annarborymca.org](http://www.annarborymca.org)**

**400 W. Washington Street**

**Ann Arbor, MI 48103**

**734-996-9622**

# Commonly Asked Questions

## **Q. What is YMCA financial assistance?**

**A.** The Ann Arbor YMCA believes in providing membership and program services to all who desire to participate. The Ann Arbor YMCA's financial assistance program, supported in part by the Annual Campaign, uses all available resources to provide support to those who have financial need and qualify for assistance.

## **Q. Who is eligible for YMCA financial assistance?**

**A.** Anyone may apply for financial assistance. Approval of applications is made on an individual basis. The association uses a sliding-fee scale based on total household income and number of dependents. The scale assists YMCA representatives in determining the amount of scholarship awarded and its applicable time frame.

## **Q. Is it possible to join the Ann Arbor YMCA for free?**

**A.** The YMCA believes a strong sense of ownership and pride is developed when the financial assistance recipient contributes to the cost of their YMCA involvement. Therefore, applicants will be asked to pay a portion of the fee for the requested services.

## **Q. What is expected of me, if I receive YMCA financial assistance?**

**A.** Upon approval of financial assistance, a YMCA representative will review the conditions of the scholarship with you. Those conditions will include the length of the scholarship, the expectation that you take full advantage of the assistance by using the membership or service regularly, as well as a commitment to make payments on time. All YMCA members receive the same membership benefits regardless of whether or not they are receiving financial assistance.

## **Q. How will the financial assistance amount be determined, and how quickly can I expect to receive financial assistance?**

**A.** Scholarships are determined on an individual basis using a sliding-fee scale to assist in designating the amount of assistance. **Membership** applications are reviewed on the 15th of each month and approved applicants are notified by mail and/or email. For all other applications please contact departments directly for application due dates.

## **Q. How long will the financial assistance continue?**

**A.** Need for financial assistance is assessed at the discretion of YMCA representatives and reviewed on a regular basis.

## **Q. How do I apply?**

**A.** Complete the financial assistance application form in this brochure. Include all of the following documents (if applicable) with the application:\*

- a. most recent federal income tax return
- b. last two pay stubs
- c. state verification of assistance
- d. friend of the court/child support award letters

\*Include copies for all individuals contributing to the household income

## **Q. Who will be reviewing my application?**

**A.** A designated Ann Arbor YMCA employee will review your application. All information is handled confidentially.

## **Q. May I do anything in return for this assistance?**

**A.** Yes! YMCA donors appreciate learning how their contributions are used. Submitting a short note about how you or your family benefited from the financial assistance program is appreciated. Also, all YMCA members are encouraged to volunteer.

**Financial Assistance Application**

Proof of income must accompany all applications.

Current tax returns, paycheck stubs, or government assistance forms are required

PERSONAL (please print)

Name of person to receive assistance Birth date Gender

Spouse's name (if applicable) Birth date Gender

Street address City State Zip code

Day Phone Evening Phone

Number of adults in household Number of children in household

Dependents living at home:

Name: Gender: Birth date:

Name: Gender: Birth date:

Name: Gender: Birth date:

Name: Gender: Birth date:

**EMPLOYMENT**

Currently employed No Yes Occupation:

Employer's Name: Phone:

**STUDENTS**

Are you presently enrolled in school? No Yes Full Time Part Time

Name of school:

Are you receiving financial assistance? No Yes How much?

What program(s) are you applying for? (circle program(s) & fill in the appropriate boxes on the back) Please copy as needed. One form per individual applying for assistance.

**Child Care Camp Youth Sports Membership Aquatics Other Programs**

Please list the type of membership you are applying for :

Have you ever applied for YMCA Financial Assistance before? Date

Are you currently receiving financial assistance from the Ann Arbor YMCA? If yes, for what?



Assistance will be granted primarily on the basis of financial need. The Ann Arbor YMCA believes that a strong sense of ownership and pride is developed as the participant contributes to the cost of their YMCA involvement. Therefore, all applicants will be asked to pay for a portion of their membership/program fees.

All applications are kept confidential. Assistance will be granted to the extent that funds are available. **Membership:** Applications are reviewed on the 15th of each month and approved applicants will be notified by mail and/or email. For all other applications please contact departments directly for application due dates.

I do hereby declare that the information provided is correct. I agree to provide additional documentation to verify need if requested. Further, I understand that my eligibility will be reviewed upon request of the Ann Arbor YMCA. Failure to provide updated information will result in termination of my financial assistance. It is also the policy of the Ann Arbor YMCA that financial assistance awards will be revoked if program payments are not made on time. Participants are subject to the rules and regulations of the Ann Arbor YMCA.

Signature: Date:

Your signature indicates that you have read and understand the policies and procedures of the Ann Arbor YMCA financial assistance program.

**Aquatics**

Participant's Name \_\_\_\_\_

Class Name \_\_\_\_\_

Session \_\_\_\_\_

**Child Care**

Child's Name \_\_\_\_\_

Site or Classroom \_\_\_\_\_

Schedule \_\_\_\_\_

5 Full	All Stars (2 - 3½)
5 Half	Aviators (3½ - 5)
3 Full	AM      PM
3 Half	
School Age	
5 days	After School
3 days	After K
2 days	
	M T W R F

\* Before this application can be processed, Child Care requires the following documents: FIA/CCN letter of acceptance or denial, Friend of the Court or Child support statements

**Youth Sports/ Other Programs**

Participant's Name \_\_\_\_\_

Session \_\_\_\_\_

Name of Sport/Program \_\_\_\_\_

**Camps**

Child(ren) & Camp for which you are seeking assistance

1. \_\_\_\_\_ camp: \_\_\_\_\_ session: \_\_\_\_\_

2. \_\_\_\_\_ camp: \_\_\_\_\_ session: \_\_\_\_\_

3. \_\_\_\_\_ camp: \_\_\_\_\_ session: \_\_\_\_\_

4. \_\_\_\_\_ camp: \_\_\_\_\_ session: \_\_\_\_\_

**How much do you feel you can contribute towards your Membership/Program/Camp/Aquatics costs?**

\$ \_\_\_\_\_

TYPES OF ASSISTANCE YOU RECEIVE & THE AMOUNTS

Employment: \$ _____	SSI: \$ _____	Child Support: \$ _____
Section 8 Housing: \$ _____	Rental Property: \$ _____	TANF: \$ _____
Medical Aid: \$ _____	Investments: \$ _____	Food Stamps: \$ _____
SSD: \$ _____	Alimony: \$ _____	Other income: \$ _____

Are you receiving any third party assistance? Yes    No    If yes, the third party is \_\_\_\_\_

MONTHLY EXPENSES

Rent/Mortgage (circle one) \$ _____	Car Payments \$ _____	Student Loans \$ _____
Medical Expenses \$ _____	Utilities \$ _____	Other (please explain) \$ _____
Total Monthly Expenses \$ _____		

Please enclose photocopies only. The Ann Arbor YMCA cannot make copies for you. Original documents will not be returned. You are responsible for knowing your expiration date, as noted in your acceptance letter. Please be aware that repeat assistance may be subject to fee increases. It is up to you to submit a new application by the deadline if you would like to be considered for continued assistance. If there are financial changes in your income, you must notify the Ann Arbor YMCA. Please be aware that you may be required to provide a new application updating your qualification for financial assistance.

**Office Use Only**

Program Name: _____	Participant Name: _____	Approved by: _____	Date: _____
Total Income: _____	Scholarship %: _____	Effective Date: _____	Notification Date: _____
Program Name: _____	Participant Name: _____	Approved by: _____	Date: _____
Total Income: _____	Scholarship %: _____	Effective Date: _____	Notification Date: _____
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Total Income: _____	Scholarship %: _____	Effective Date: _____	Notification Date: _____
Notes: _____			