

TRAVEL LEAGUE BASKETBALL

MetroWest YMCA Confidential ASS/ST Application

PERSONAL INFORMATION

Name: _____ Birth Date: _____

Address: _____ Town: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Marital Status: _____

Are you a YMCA member? Yes No If yes, what is membership exp. date? _____

Have you previously received assistance from the YMCA? Yes No Date: _____

Please indicate type of assistance you are applying for: Membership Classes / Programs

If applying for membership please indicate which type:

Youth Teen Family Young Adult (18-24 yrs.) Adult Senior Sr. Family

No. in household: _____ Please list all household members below:

Name: _____	Relation: _____	Birth Date: _____
Name: _____	Relation: _____	Birth Date: _____
Name: _____	Relation: _____	Birth Date: _____
Name: _____	Relation: _____	Birth Date: _____

EMPLOYMENT

Are you currently employed? _____ Other household adults currently employed? _____

Adult #1 employer: _____ Adult #2 employer: _____

Address: _____ Address: _____

Occupation: _____ Occupation: _____

Length of time with employer: _____ Length of time with employer: _____

INCOME

Household monthly gross: \$ _____

Please include child support and any other income.

Income verification is required on both adults.

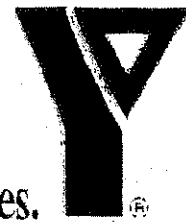
I certify that the information on this form is accurate and true. I agree to pay the amount determined by the YMCA on a timely basis and realize that failure to do so may result in the loss of services.

Applicant Signature: _____ Date: _____

In order to process this application, please attach a copy of your most recent 1040 tax form or copies of government subsidies along with two recent pay stubs.

*Assistance is awarded based on state sliding scale fee guidelines.
Please list any extenuating circumstances that might be helpful in processing your application.
The amount of assistance offered will not exceed the resources of the MetroWest YMCA.*

MetroWest YMCA



We build strong kids, strong families, strong communities.

The MetroWest YMCA believes that its programs and services should be available to everyone. However, the Y understands that not everyone is in a financial position to take full advantage of the programs and services offered by the Y.

ASSIST is a financial assistance program offered by the MetroWest YMCA to help make the Y accessible to everyone. ASSIST is available for most programs and services offered at the main Branch in Framingham, the Hopkinton Branch, and our child care programs.

YMCA programs and services are designed to benefit persons of all backgrounds. Fees are based on the cost of providing each program. Each year, the MetroWest YMCA provides over \$700,000 in financial assistance for membership, classes, child care, summer camp and teen outreach. The application process is confidential and once accepted, the assisted person has full privileges of the membership or program enrolled in.

Q: WHO CAN APPLY FOR ASSISTANCE?

The MetroWest YMCA will award financial assistance to anyone who lives or works in the MetroWest area and to anyone who can benefit from a membership or particular program or service. All we ask is that you use the services for which you receive assistance.

Q: CAN I CHANGE ADULT MEMBERS ON MY FAMILY ASSIST MEMBERSHIP?

No, You cannot change adult members on a Family Assist membership without reapplying for financial ASSIST.

Q: HOW MUCH ASSISTANCE WILL THE YMCA PROVIDE?

That depends on the extent of the need and the program offered. We have a sliding scale that takes income and family size into account. The sliding scale is used to award assistance to benefit as many people as possible.

Q: WHO WILL SEE THIS INFORMATION?

Your application is considered confidential and will be seen only by YMCA staff responsible for processing the application.

Q: HOW DO I GET ASSISTANCE?

Fill out a confidential ASSIST application (available at our Member Service Desk). Specify the program or type of membership you are applying for and provide proof of income. You will be notified promptly by mail regarding the status of your application. Your application cannot be processed without the following information:

- *Most recent tax return*
- *Copies of government subsidies*
- *Two payroll stubs*

Q: WHO FURNISHES THE FUNDS?

The assisted memberships and program fees are funded through the generous donations of members, contributors to the Partners With Youth Campaign, special grants and United Way. If you would like to help, please contact us at 508-879-4420, ext. 53.

YMCA ASSIST Q & A