



# APPLICATION FOR YMCA MEMBERSHIP ASSISTANCE

Please complete and forward this form to our YMCA Membership Services desk. Information received will be kept confidential. Please note that photo ID is required for all those above the age of 16.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell: ( ) \_\_\_\_\_ - \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 Circle One: Married/Common Law/Single Address: \_\_\_\_\_  
 City & Postal Code: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Emergency Contact Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

### OTHER FAMILY MEMBERS CURRENTLY RESIDING WITH YOU:

First Name / Last Name	M/F	Birth Date	Age
1.			
2.			
3.			
4.			
5.			

**Please indicate your annual household income below, and provide the following documents with your application:**

**TOTAL FAMILY HOUSEHOLD INCOME:**  
 \_\_\_\_\_ annually

**Staff Signature:** \_\_\_\_\_

**Proof of Household Income: Recognized Sources**

- Trillium Benefit
- Ontario Works Statement
- ODSP Statement
- OAS and/or GIS
- Notice of Assessment (Most recent or one year past.)
- T4 /(T5—Investment Income)

- Child Benefits (UCCB & CCTB)
- Child Disability Benefit

**Proof of Household Income**

- If the above mentioned documentation does not exist a Financial Disclosure will be required with pay stub/s and supporting documents.

I declare that the information provided is accurate. I am aware that the YMCA Financial Assistance Program is intended for individuals who are in need and who are unable to afford the full fee. If at any time my financial situation changes, and I am able to make a greater contribution, I will contact the Y to have my fee adjusted. By accepting financial assistance from the YMCA of Simcoe/Muskoka, I am agreeing to the use of my personal information for statistical purposes, and the consent and release of my name and age for administrative use with our partners as they relate to funding opportunities for our financial assistance program. Your personal information will not be shared.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

FA Rate Accepted by Applicant? Y  N

Approved Monthly Membership Fee: \$ \_\_\_\_\_ /month \$ \_\_\_\_\_ paid by donations to the YMCA

Member Signature: \_\_\_\_\_ Staff Signature: \_\_\_\_\_

This application approval will be valid for one month. To start your membership you will need: 1. This approval. 2. Void cheque, Visa or MC. 3. Photo ID. 4. Payment for your first month



## **YMCA Membership Assistance Program**

### ***Who is eligible for the Membership Assistance Program?***

At the YMCA, we offer opportunities to all individuals regardless of race, age, sex, creed, ability or economic circumstances. Men, women and children come to the YMCA to grow and develop into happier, more productive people. Regular participation in YMCA membership activities supports a balanced approach to personal growth, health and wellness. Our Membership Assistance program serves those individuals and families who have the greatest need in our community. They are unable, not unwilling, to pay the full fee for a general membership.

### ***How do I qualify?***

We will make every effort to accommodate those in greatest need who wish to participate in YMCA programs through a YMCA General Membership. Those in receipt of government social assistance programs are pre-qualified. Alternatively, we can also make approvals based on a person's Notice of Assessment from Income Tax. If you do not pre-qualify, but feel that you do need assistance, a meeting can be arranged with YMCA management to look at your current income vs. expenses. It would then be necessary to gather proof of all monthly expenditures for your household (spouse, common-law, supported adult children included) and bring these documents with you to your meeting to complete a financial disclosure.

### ***How does the YMCA determine what I can afford to pay?***

A YMCA Membership Services Representative will spend time with you to discuss your current financial circumstance in order to determine a manageable monthly amount. Your fees will be based on your household income, the size of your household, and your commitment to using your YMCA membership on a regular basis. We ask that any sponsorship you or your family may be granted, remain confidential.

### ***What if I do not qualify for Membership Assistance?***

In rare cases that can happen. Applicants for YMCA Membership Assistance need to make a commitment to participate in YMCA programs as well as make a financial contribution toward their YMCA membership. No one is denied access to a YMCA membership because of an inability to pay, but some decide they are not willing, and decide not to join. Should you have further questions or concerns, please see the Supervisor of Membership Sales and Service, or the General Manager.

### ***How do I renew my membership?***

We hope that over the term of your membership, your financial situation has improved. Each year you will be notified in writing of a fee increase or the request to re-apply for the program, at least 30 days prior to your renewal date. Should you be unable to afford the new monthly rate, we ask that you come in to re-apply with your financial documentation or cancel the membership in writing at least 7 days prior to your next payment. Should you no longer require a sponsorship for your membership please notify us as soon as possible (even during your term) so that others in need may benefit from this program.

### ***How is the Membership Assistance program funded?***

The YMCA Membership Assistance Program is funded through our annual YMCA Strong Kids Campaign, by individual donors, service clubs and businesses. Should you be interested in making a donation, assisting as a fundraising canvasser, or giving back to the YMCA by volunteering your time, please see a Membership Sales & Service representative.