

**For office use only**

Date of Award \_\_\_\_\_ Date Received \_\_\_\_\_ Percent Awarded \_\_\_\_\_ Annual Income \_\_\_\_\_



## YMCA Financial Assistance Application

*Applications with missing documentation or incomplete information will not be considered for funding.*

***Applications may take up to 10 working days to process.***

**PLEASE COMPLETE all information and answer all questions. *This application is confidential.***

**You must complete steps the following to be considered for Financial Assistance:**

- 1) The YMCA requests from each applicant **any two of the following documents** From **each** adult in the household before determining Financial Assistance:
  - a) Most recent tax return (1040 or W-2)
  - b) Last two (2) paycheck stubs
  - c) Copies of other financial assistance as applicable (SSI, AFDC, etc.)
- 2) **Students:** you must submit eligibility for Student Financial Aid with your application.
- 3) Return the completed application along with the proper documents listed above to:  
*San Luis Obispo County YMCA, Attn: Dana Vicars  
1020 Southwood, San Luis Obispo CA, 93401 (805)-543-8235 ext. 106*

### **APPLICANT INFORMATION**

**Applicant's Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Email address (print clearly)** \_\_\_\_\_

**Employer's Name and Address:** \_\_\_\_\_

**Length of Employment:** \_\_\_\_\_

### **HOUSEHOLD INFORMATION**

***(Please only include people living in household.)***

Total # of Adults in Household (ages 18 and over): \_\_\_\_\_

Total # of Children in Household (ages 17 and under): \_\_\_\_\_

Total # Persons in Household: \_\_\_\_\_

**\*Second Adult's Name** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Work Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Employer's Name and Address:** \_\_\_\_\_ **Length of Employment:** \_\_\_\_\_

**Children in Household (ages 17 and under):**

**Name** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Name** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**INCOME INFORMATION**

Monthly take-home income of Applicant: \_\_\_\_\_

Monthly take-home income of Second Adult: + \_\_\_\_\_

**COMBINED** Monthly Take-Home Income: = \_\_\_\_\_

Are you currently receiving **any** financial assistance?  Yes  No  
 What type and how much? (AFDC, SSI, Child Support, Food Stamps, etc)

Type \_\_\_\_\_ Monthly Amount \_\_\_\_\_

Have you received YMCA Financial Aid in the past?  Yes  No  
 YMCA Program(s): \_\_\_\_\_

Date Financial Assistance Received: \_\_\_\_\_

What amount are you able to pay toward your fee? \_\_\_\_\_

**Please check *all* programs you wish to receive financial assistance for:**

School Year	Summer	Sports	Membership
<b>After School</b> <input type="checkbox"/> Centennial Park (Paso Robles) <input type="checkbox"/> Grover Beach <input type="checkbox"/> Healthy Kids Club (SLO) <input type="checkbox"/> Los Ranchos <input type="checkbox"/> Monarch Grove <input type="checkbox"/> Fairgrove <input type="checkbox"/> Shell Beach	<b>Specialty Camps</b> <input type="checkbox"/> Tots (ages 1-3) <input type="checkbox"/> Specialty (ages 4 -8) <input type="checkbox"/> Sail Away Camp (ages 8-13) <input type="checkbox"/> Surf camp (ages 6- adult) <input type="checkbox"/> Leadership Development (ages 12-17)	<b>SLO Youth Sports</b> <input type="checkbox"/> Youth Roller Hockey <input type="checkbox"/> T-Ball Coach Pitch	<b>SLO Fitness Membership</b> <input type="checkbox"/> Massage <input type="checkbox"/> Personal training <input type="checkbox"/> Y Art Classes <input type="checkbox"/> Teen Membership <input type="checkbox"/> Student (currently enrolled) <input type="checkbox"/> Adult <input type="checkbox"/> Family <input type="checkbox"/> Senior (55+) <input type="checkbox"/> Senior Family <input type="checkbox"/> CPR & First Aid <input type="checkbox"/> Racquetball Tournament <input type="checkbox"/> Fun Runs <input type="checkbox"/> Youth Fitness Classes
<b>Preschool</b> <input type="checkbox"/> Paso Robles <input type="checkbox"/> Los Ranchos	<b>Character K4 Summer Day Camp</b> <input type="checkbox"/> South County <input type="checkbox"/> San Luis Obispo <input type="checkbox"/> North County/Paso	<b>Planet Y Summer Day Camp</b> <input type="checkbox"/> South County <input type="checkbox"/> San Luis Obispo	<b>South County Youth Sports</b> <input type="checkbox"/> Youth Roller Hockey <input type="checkbox"/> Youth Flag Football <input type="checkbox"/> Bitty Sports _____
<b>Teen X-treme After School</b> <input type="checkbox"/> Centennial Park-Paso Robles	<b>Adventure Club 58 Camp</b> <input type="checkbox"/> Five Cities <input type="checkbox"/> San Luis Obispo <input type="checkbox"/> Paso Robles	<b>North County Youth Sports</b> <input type="checkbox"/> _____ <input type="checkbox"/> _____	<b>OTHER (please write below)</b> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<b>High School Programs</b> <input type="checkbox"/> Youth & Government	<b>Teen Expeditions (Summer)</b> <input type="checkbox"/> _____ <input type="checkbox"/> _____	<b>SLO Bitty Sports</b> <input type="checkbox"/> Soccer <input type="checkbox"/> T-Ball <input type="checkbox"/> Basketball	<b>Parent/Child Programs</b> <input type="checkbox"/> Y Guides & Princesses <input type="checkbox"/> _____
<b>Vacation Day Camps</b> <input type="checkbox"/> Winter Location: _____ <input type="checkbox"/> Spring Location: _____			

**SPECIAL FUNDING PROGRAMS:**

revised 3/18/10

GTI  Other\_\_\_\_\_

DSS/Tri-Counties

**Policy Statement**

It is the policy of San Luis Obispo County YMCA to provide services within the limits of our resources to anyone who wishes to participate in our programs and understands the benefits of the YMCA, regardless of his/her ability to pay the standard fees. The San Luis Obispo County YMCA believes that a strong sense of ownership and pride is developed if the assistance recipient contributes to the cost of his/her YMCA involvement.

**Therefore, all applicants will be asked to pay a portion of the fees involved.**

**Financial Assistance Scale**

The San Luis Obispo County YMCA determines its awards based on the City of San Luis Obispo's report on affordable housing standards.

***The statements I have given are true and correct. I have read and agree to the above conditions for the San Luis Obispo County YMCA program financial assistance.***

Applicant's Signature\_\_\_\_\_Date\_\_\_\_\_

Print Applicant's Name\_\_\_\_\_

