# the YMCA OF PUEBLO

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

## Financial Assistance Application

## APPLY IN 3 EASY STEPS!

START

Please seclect your prefered Membership Type:

☐ Young Adult ☐ Adult ☐ Senior ☐ Couple

☐ Senior Couple ☐ Family ☐ Single Parent

How many people live in your household _____

### Step 1

### APPLICANT INFO:

Name_____

Mailing_____ DOB_____

City_____ State_____ Zip_____

Primary Phone_____ Secondary Phone_____

Email_____

Parent/Guardian name (if under 18): _____

### Step 2

### PLEASE SUBMIT THE FOLLOWING DOCUMENTS: (Photocopies only)

**I FILED FEDERAL TAXES FOR LAST YEAR**

- Financial Assistance application
- Copy of most recent W-2
- A personal letter explaining your need for assistance
- Any other sources of income (Child support, etc.)

OR

**I DID NOT FILE FEDERAL TAXES FOR LAST YEAR**

- Financial Assistance Application
- Copy of most recent W-2
- A personal letter explaining your need for assistance
- Copy of the last two pay stubs or unemployment income
- Any other sources of income (Food stamps, Housing, etc.)

Please answer the following on a separate sheet of paper:

1. Why are you requesting financial assistance?
2. How will YMCA financial support you and your family?
3. Provide a story of how the YMCA of Pueblo has impacted you.

### Step 3

**THIS APPLICATION MUST BE RENEWED AT LEAST EVERY 12 MONTHS!**

I certify that the above information is true and complete to the best of my knowledge, and that I do not have any additional unclaimed income. To cancel our participation in the assistance program, I will contact the YMCA immediately so sponsorship can be provided to others. I agree to send additional information and documentation, if necessary, to support the above statements. I understand that sponsorship assistance is based on need; If I falsify any of the information above, I will not be eligible for assistance now and/or in the future.

_____ _____

Signature of person completing this form Date

Attach all applicable documents and turn in to your YMCA Member Services Desk.

### Y STAFF USE ONLY

Approved ---- Yes No

YMCA_____% You_____%

Join today for $_____

Staff Name:_____

Date:_____

AWARD IS VALID FOR 30 DAYS.

Payment plans are available. YMCA Staff: Return financial documents to the applicant. Copy this form and give it to the applicant.

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# WELCOME TO ALL

## Financial Assistance Application

### THE ESSENCE OF THE Y

**With a commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility, the YMCA of Pueblo ensures that every individual has access to the essentials needed to learn, grow and thrive.**

### EVERYONE IS WELCOME

**The YMCA welcomes all who want to participate and believes that no one should be denied access to the Y based on their ability to pay. Through our Community Support Campaign, the YMCA of Pueblo provides assistance to youth, adults, and families based on individual needs and circumstances.**

### COMMITTED TO OUR COMMUNITY

**Every Y member receives the same membership benefits, regardless of whether or not they receive assistance. YMCA members can feel confident knowing that they are part of an organization that cares greatly for the well-being of all people, and is committed to youth development, healthy living and social responsibility.**

- **Financial Assistance reduces membership fees; it does not eliminate them.**
- **The YMCA requests that individuals and families reapply annually.**
- **If you do not reapply by the requested time, your membership will TERMINATE.**
- **Please contact the YMCA of Pueblo if you have any questions.**