



Anaheim Family YMCA Financial Assistance Procedure

The Anaheim Family YMCA is committed to making its programs available to everyone. Financial assistance is available, especially to families who otherwise would not be able to participate.

Eligibility

1. Applicants who reside in the YMCA service area will be given priority.
2. Assistance may be awarded based on financial need. All individual fees are kept confidential, as they are specific to individual and family circumstances.
3. A completed application with attached proof of income is required.
4. Household must fall on or below the "Family Size and Income Level Scale," a standard HUD guideline.
5. Eligibility for assistance will be reviewed annually or as deemed necessary.

To apply:

1. Complete a financial aid application.
2. Attach copies of the most current proof of income for each working member of the household (all types of income must be included).
3. Submit the application and documents to the YMCA.
4. In order to continue participation in your program without interruption or delay, you must return the requested paperwork by the deadline provided.

Process

- ◆ Once ALL documentation and completed application have been received, there is a brief processing period, which may take up to two weeks.
- ◆ Applications will NOT be processed without proof of income.
- ◆ Applications will be reviewed on a first come, first served basis. The remainder of qualified applicants will be placed on a Financial Assistance waiting list for each program.
- ◆ Applicant must reapply annually. The applicant is to notify the YMCA if the income status of any members of the household changes.
- ◆ After a thorough review of the application and documentation, the YMCA will grant financial assistance to the extent that funds are available. The YMCA reserves the right to refuse assistance to any applicant.



Anaheim Family YMCA Financial Assistance Application

INSTRUCTIONS

Follow these instructions carefully to prevent delay in processing your application:

1. Complete a YMCA financial assistance application.
2. Attach copies of documentation of household income which may include:
 - a. Copy of your federal tax return (Form 1040, 1040A, 1040EZ, etc. If you do not have a copy of your tax return or did not file an income tax return last year, you may obtain a copy of your taxes or a letter of verification by calling the IRS at (800) 829-1040 or at www.irs.gov.)
 - b. Recent pay stub (within the last 30 days)
 - c. Unemployment or Social Security benefits statements
 - d. Child Support
 - e. Verification of any other assistance received (housing assistance, food stamps, etc.)
3. Return your completed application and copies of all supporting income documentation.

The YMCA is not responsible for returning any documentation that accompanies the application. Please only attach copies and ensure that you have kept all of your original documents.

PARTICIPANT INFORMATION

	Participant Name	Gender	Age	Program(s) Applying For (see list below)	Site or School Name (if applicable)
1					
2					
3					
4					
5					

List of programs to fill in above:

- Anaheim Achieves (note school name)
- Children's Station
- Day Camp (note site name)
- Resident Camp (note *Fox* or *Miehana*)
- Sports

HOUSEHOLD INFORMATION

*Complete grayed areas only if different from program application

Legal Guardian #1 Name: _____ Relation: _____

Home Phone #: (_____) _____ Cell Phone #: (_____) _____

*Address: _____

City: _____ State: _____ Zip Code: _____ Email: _____

Employer: _____

Occupation: _____ Work Phone #: (_____) _____

Legal Guardian #2 Name: _____ Relation: _____

Home Phone #: (_____) _____ Cell Phone #: (_____) _____

*Address: _____

City: _____ State: _____ Zip Code: _____ Email: _____

Employer: _____

Occupation: _____ Work Phone #: (_____) _____

Please share your reasons for seeking financial aid: _____

How did you hear of our assistance program? _____

	Names of ALL People Living in Household	Date of Birth & Age	Monthly Income
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
Total Monthly Income:			

Additional income sources not listed above: (child support, spousal support, food stamps, housing, social security, school aid, OCDE/CHS, AFDC #, etc.)

Income source: _____ Amount: _____

Income source: _____ Amount: _____

How much do you feel you can pay towards the program? \$ _____ per child

I certify that the above information is true and complete to the best of my knowledge. I have attached **ALL** the documentation listed that applies to my household income. I understand that the processing of this application may take up to **two weeks**, upon which a YMCA representative will contact me. I agree to provide additional documentation to verify financial need if requested.

Applicant's Signature: _____ Date: _____