



The Spirit Program

FINANCIAL ASSISTANCE APPLICATION

The YMCA of Greater Louisville believes that its programs and services should be available to everyone -- regardless of age, background, ability or income. That's why we offer The Spirit Program, a financial assistance program that guarantees no one will be turned away due to an inability to pay.

Sharing the financial responsibility will give you peace of mind, as well as a sense of ownership and pride. Those who qualify will be asked to pay only a portion of the established rate. Generous Y members and other donors contribute the remaining amount by giving to the annual YMCA Spirit Campaign.

To apply, you are required to provide the information requested on this flyer regarding income, family size and necessary expenses so that we can provide assistance in a fair and consistent manner. *All information will be kept confidential.*

Please allow two-four weeks for your application to be processed. After reviewing your application, a YMCA director will determine financial assistance eligibility. You will be notified by telephone or mail if your application is approved or if you need to submit additional information. Assistance is awarded on a first come, first served basis and subject to available resources.

Assistance is reviewed for eligibility every two years and fees are subject to change. You are required to reapply as requested and keep your application updated. If you do not reapply, fees will increase to 100 percent of the established rate.

YMCA of Greater Louisville • Request for Financial Assistance

Applicant's Name _____ Date _____

Email _____ DOB _____

Home Phone _____ Cell Phone _____

Home Address _____
(street) (city/state) (zip)

Place of Employment _____ Business Phone _____

2nd Adult in Household _____

DOB _____ Place of Employment _____

Home Phone _____ Business Phone _____

For which of the following are you seeking assistance?

Membership: Branch _____ Individual Family

Program: Branch _____ Program Name _____

Other:

Pre-school child care at _____
(branch)

School-age child care at _____
(site)

Current facility member? No Yes Member Number _____

Current child care participant? No Yes

To process your application, ALL of the following information is REQUIRED. If you did not file taxes, or you do not have one of the other required documents, you must submit a letter explaining your personal situation.

- A copy of the first page of the tax form from your most recent tax return. (If you do not have a copy of your tax return, you may obtain one by calling the Internal Revenue Service.)
- Proof of income for EACH ADULT in the household. This includes copies of the last TWO pay stubs, social security checks or disability checks. You may also submit copies of bank statements showing automatic monthly deposits of government checks.
- Documentation of ANY federal assistance you receive such as food stamps, rent subsidy or Aid to Dependent Children cash assistance.
- Student loan documentation, if applicable.

Dependents Living in Household

	Name	Age	Date of Birth
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Gross Annual Household Income & Expenses

	Head of Household	2nd Adult in Household	Household Expenses
Employment	_____	_____	Mortgage/Rent _____
Child Support	_____	_____	Electric/Gas/Water _____
Government Assistance	_____	_____	Insurance _____
Food Stamps	_____	_____	Phone _____
Student Loan	_____	_____	Cable TV _____
Other	_____	_____	Credit Cards _____
Total	_____	_____	Auto Loan _____
			Total _____

Describe your circumstances/reason for applying for financial assistance and any unusual expenses you must meet: (Attach additional pages if necessary.)

I feel I am able to pay \$ _____ toward the cost of the membership/program/service.

I certify that the above information is true and complete to the best of my knowledge. I agree to inform the YMCA immediately of any change in my income or family size. I understand that false or incomplete information could jeopardize my financial assistance.

Signature _____ Date _____