



Financial Support Application

Our Mission: To put Christian principles into practice through programs, services, and relationships that build healthy spirit, mind, and body for all.

To apply, you must provide the YMCA with supporting documents from one of the three buckets below. Once the application is completed in full and supporting documents are gathered, submit to the Member Experience Team at the YMCA.

Incomplete applications will not be accepted.

Bucket #1	Bucket #2	Bucket #3
<ul style="list-style-type: none"> - Valid Driver's License or State ID for all adults on application - Most current 1040 or non-filing letter (from the IRS) <p>IRS Office: (844) 545-5640</p>	<ul style="list-style-type: none"> - Valid Driver's License or State ID for all adults on application - 3 most recent pay stubs - SNAP Statement 	<ul style="list-style-type: none"> - Valid Driver's License or State ID for all adults on application - Non filing letter (from IRS) - Social Security Statement, Child Support Order, Link Card Statement

Applicant Name: _____

Applicant Date of Birth: ____ / ____ / ____

Street Address: _____

City: _____ Zip: _____

Phone Number: _____

Email: _____

Are you currently employed? Circle one: **Yes** or **No**

If you are employed, where?: _____

Is your spouse currently employed? Circle one: **Yes** or **No**

If they are employed, where?: _____

Gross Household Income (Found on 1040): \$ _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

Will anyone on your account be participating in either of the specialty programs listed below? If so, please write the name(s) of the individual(s) in your household who will be participating.

FLYERS Club Basketball			
Falcons Swim Team			
Small Group Training			

Please list monthly, gross income for everyone living in the household.								Application Status *Check one*	
Initial	Gross Wages, Salaries, Tips	Unemployment	Social Security/ Disability	Pension	Child Support	SNAP	Other	New application	Renewal



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Please list everyone residing in your permanent residence.

Name	DOB	Gender (M/F)	School/Employer	Relationship to Applicant

Financial Support Terms and Conditions

As a beneficiary of the YMCA’s Open Door Membership program, I hereby agree to the following terms and conditions. My signature below represents my understanding to each of the following.

1. Regardless of participation, I am responsible for paying my monthly dues for the duration of my approval period.
2. A \$10 Activation Fee must be paid in addition to a prorated monthly fee at the time of my membership activation. For instant access to the facility, the member may pay the \$10 Activation Fee with the front desk staff at the time of instant approval.
3. Members with outstanding balances will not be allowed to participate in programs or membership until the balance is paid in full.
4. I will notify the YMCA of any changes in address, phone number, or email address during the course of my membership.
5. I will notify the YMCA of any change in income during the course of my membership.
6. The YMCA reserves the right to review my application at any time during the 12-month approval term. Should I be randomly selected, I will complete a new application.
7. The current approval rate is valid for 12 months. After 12 months, my account will auto-terminate and I will complete a new application.
8. I understand that certain YMCA programs are not eligible for additional discount.
9. All memberships, including Financial Support, are required to have a billing method on file to draft for monthly membership dues. Exceptions to this policy will be made solely at the discretion of YMCA Leadership. Membership drafts will occur on the 1st of each month.
10. Members who choose to draft from a credit or debit card will be subject to a \$1.95 Convenience Fee on top of their approved monthly membership dues.
11. If my billing method is declined for any reason, a non-negotiable \$25.00 Returned Payment Fee will be added onto my account.

Applicant Signature: _____ Date of Submission: ____/____/____

Our Core Values: Caring – we will genuinely demonstrate kindness and concern for others at all times. **Honesty** – We will tell the truth at all times. **Respect** – We will be courteous and inclusive of others and value the worth of every person at all times. **Responsibility** – We are accountable for our behaviors, actions, and choices at all times.

Our Vision: The Bloomington-Normal YMCA will strengthen our community through youth development, healthy living, and social responsibility. The Y will build strong kids, families, and strong communities by enriching the lives of all people in spirit, mind, and body.