

YMCA of Southern Interior BC Financial Assistance Application

The YMCA believes that no barrier should stand in the way of all of us getting stronger, together. We are a leading charity that provides financial assistance to those in need.

If financial circumstances are limiting your ability to participate, you may be eligible for Financial Assistance. Please take a moment to provide us with some personal information so that we can assess your request. **Any information you provide will be kept strictly confidential.**

APPLICATION INSTRUCTIONS:

- Fill in the application form.
- Bring the completed application form and supporting documents to the branch you would like to join for review by Membership Services.
- Tour the Y branch to learn about what programs and services are the right fit for you.
- Sit down for a confidential interview to assess your situation and how you can get started in your new community.
- Please be prepared to make your first payment and provide a credit card, void cheque or stamped preauthorized debit (PAD) withdrawal agreement from your bank to activate your YMCA membership.

MAIN CONTACT:					
Last Name:		First Name:			
Address:	City:	-	Postal Code:		
Main Phone:	Secondary Phone:	1	Date of Birth (M/D/Y):		
Email:					
Confirmation of Identity:	PHOTO ID (ex. Driver's	s license, passpor	rt, student card, etc	c.)	
SPOUSE/DEPENDANT(S) LIVING IN HOUSEHOLD: First & Last Name			Date of Birth (M/D/Y)	Age	Gender



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Financial Assistance Application

First & Last Name	Date of Birth (M/D/Y)	Age	Gender

NET FAMILY INCOME (AFTER TAXES)		HOUSEHOLD MAKEUP	
Monthly household income applicant #1	\$	# of employed adults in household	
Monthly household income applicant #2	\$	# of unemployed adults in household	
Other household income*:	\$	# of individuals under 19 in the household	
Total monthly income:	\$	Amount in dollars you feel that you can contribute per month	\$

For the YMCA to assess your application, please provide us with the previous year's Notice of Assessment for you and your spouse/partner, **regardless of whether they are joining the Y**. If you are unable to provide a Notice of Assessment, please provide one of the following:

- 3 months of consecutive pay stubs
- 3 months of bank statements showing income only (all other transactions may be blacked out and will not be considered)

I verify this information to be accurate and accept responsibility for notifying the YMCA should my financial situation change. I confirm that I am over the age of 18 and have carefully read and understood this application.				
Applicant #1:				
	Applicants Name (Printed)	Applicant Signature		
Applicant #2:				
	Applicants Name (Printed)	Applicant Signature		
Date:				

^{*}Other includes: income assistance (welfare, Employment Insurance, BC Housing Benefit, CPP, Old Age Security), alimony, child support, tips, cash jobs & GST cheques.