



www.limestoneymca.org

Limestone Family YMCA

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## OPEN DOORS PROGRAM

### FINANCIAL ASSISTANCE APPLICATION

#### APPLICANT INFORMATION (please print)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/State Zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### List all individuals residing in household

Spouse / Child or Children Name(s)	Date of Birth	Age	Relationship	Employer/School
_____	____/____/____	____	_____	_____
_____	____/____/____	____	_____	_____
_____	____/____/____	____	_____	_____
_____	____/____/____	____	_____	_____
_____	____/____/____	____	_____	_____

#### I AM APPLYING FOR (CHECK ONLY ONE CATEGORY):

☐ Teen (age 12-18)

☐ Family (2 adults and children)

☐ Young Adult (age 19-25)

☐ Senior (age 62+)

☐ Adult (age 26 & older)

☐ Senior Family (2 seniors w/or w/o children)

\*The backside of this page requires your financial information. PLEASE make sure you turn in all required documentation with application!

# FINANCIAL ASSISTANCE APPLICATION

Assistance may not be awarded if any information is incomplete.

Did you, or anyone in the household, file federal income taxes last year? \_\_\_\_ Yes \_\_\_\_ No

If yes, who filed: \_\_\_\_\_ (W-2 not accepted. Must provide copy of Fed Tax Form 1040.)

If no, why not? \_\_\_\_\_

Does someone claim you as a dependent on Federal Income Taxes? \_\_\_\_ Yes (Must include that person's income)

**Please complete and provide documentation for all sources of income from all adults in the household.**

**Lack of documentation may prevent you from receiving a discount.**

- Monthly wages earned by all wage earners in the household. Must provide most recent 30 days of pay stubs for all wage earners. \_\_\_\_\_ Monthly
- Income earned as Independent Contractor \_\_\_\_\_ Monthly
- Unemployment benefits \_\_\_\_\_ Monthly
- Child support / alimony \_\_\_\_\_ Monthly
- Social Security / SSI \_\_\_\_\_ Monthly
- Food Assistance (SNAP) \_\_\_\_\_ Monthly
- Retirement / pension \_\_\_\_\_ Monthly
- Foster Parent per diem \_\_\_\_\_ Monthly
- Cash Assistance \_\_\_\_\_ Monthly
- HUD / Rental assistance \_\_\_\_\_ Monthly
- Cash payment for work performed (provide a letter from employer with average amount paid each month) \_\_\_\_\_ Monthly
- Other \_\_\_\_\_ Monthly
- Other \_\_\_\_\_ Monthly

**TOTAL** \_\_\_\_\_ **Monthly**

**Above Monthly total x 12 = ANNUAL TOTAL** \_\_\_\_\_

**Also required for all individuals in household who filed federal income taxes:**

Copy of 1040 Federal Tax Form and Schedule C if Self Employed. W-2 not accepted.

Total Gross Income from Tax Form for all filers: \_\_\_\_\_

**What do you feel you can afford to pay per month?** \_\_\_\_\_

**Adults, not claimed as someone's dependent, who claim no income and/or have no documentation of income must provide a letter, on letterhead, from a social service agency or faith organization validating estimated household income and need for financial assistance.**

## **THIS APPLICATION MUST BE RENEWED EVERY 12 MONTHS**

I certify the above information is true and complete to the best of my knowledge, and that I do not have additional income not represented above. I agree, if necessary, to send additional information and documentation to support the above statements. I understand that this discount is based on need. I understand that falsifying any of the above information could jeopardize a membership discount now and/or in the future.

Signature of person completing this form \_\_\_\_\_

Date \_\_\_\_\_

**How will it help and benefit yourself and/or your family to have this assistance?**

**Why is the Limestone Family YMCA important in our community?**

**OFFICE USE ONLY:** APPROVED Yes \_\_\_\_ No \_\_\_\_ Date Approved \_\_\_\_\_ Y \_\_\_\_ % YOU \_\_\_\_ %

Membership Type: \_\_\_\_\_ Monthly \$ \_\_\_\_\_ 6 months \$ \_\_\_\_\_ Annual \$ \_\_\_\_\_

One Time Joiners Fee \$ \_\_\_\_\_ Staff Initials \_\_\_\_\_

## **FREQUENTLY ASKED QUESTIONS**

### **WHAT IS THE OPEN DOORS PROGRAM?**

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

### **WHO IS ELIGIBLE FOR FINANCIAL ASSISTANCE?**

An active adult on a fixed income, a single parent who is trying to make ends meet, a family in transition, someone who needs a little help for a while—all of these are faces of the YMCA Open Doors Program.

### **HOW IS THE FINANCIAL ASSISTANCE AMOUNT DETERMINED?**

The amount of assistance is based on the annual gross income and the number of dependents. We offer a sliding scale fee after completion of confidential application.

### **IS IT POSSIBLE TO JOIN THE Y FOR FREE?**

**No.** The Y believes a strong sense of ownership and pride is developed when the Membership Discount recipient contributes to the cost of their Y membership. Therefore, applicants will be asked to pay a portion of their membership and program fees.

### **HOW QUICKLY CAN I EXPECT TO GET APPROVED?**

Completed applications will be reviewed within 14 working days. Please submit your completed application along with proof of income. You will receive a letter in the mail indicating whether or not you've been approved, along with the cost of your membership.

### **HOW LONG WILL THE FINANCIAL ASSISTANCE CONTINUE?**

The discount is generally granted for one year. If you are currently unemployed or waiting on SSI or other benefits, we will grant your discount for six months, after which you must reapply. Most participants must reapply each year.

### **IS ASSISTANCE AVAILABLE FOR ALL PROGRAMS?**

Assistance is available for all memberships, most programs and childcare. Please see the membership representative for details on specific programs.