



# SOUTH SHORE YMCA Financial Assistance Application

FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

In order to better serve you, the South Shore YMCA offers a 30 day TRUST and VERIFY welcome period for Financial Assistance applicants. All required documentation must be submitted within 2 weeks of Membership Activation Date. In the interim, we welcome you to enjoy all the wonderful benefits our YMCA facility has to offer.

Please print. Be certain to attach all required documents.

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Company \_\_\_\_\_ Occupation \_\_\_\_\_

**IMPORTANT**

If you are receiving AFDC/TANF, unemployment, food stamps, and/or Social Security, you attach a copy of your grant notification form(s).

**To complete your application you must attach the following copies:**

- Most recent copy of your federal income tax form
- Four consecutive pay stubs
- Copy of your mortgage statement or rental agreement
- Utility bills

Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

I attest that all of the information provided is true.

Please list additional people living in your household, whether related or not:

Name	Age	Employer/School	Email

I am applying for financial assistance for (check all that apply):  Membership and/or  Programs

Select program(s):  Early Learners  After School  Adult  Youth  Child  Senior  Other

Which location are you applying to?:  Emilson  Quincy  Passport (access to Emilson and Quincy)

Membership Type:  1 Adult/1 Youth (0-9)  Junior (10-22)  Young Adult (23-27)  Adult (28-64)  
 Senior (65+)  Household  Passport

Have you ever applied for financial assistance at the South Shore YMCA before?:  No  Yes

Personal Financial Information: Please itemize your monthly, pre-tax income and selected expenses:

<b>Monthly Income:</b>		<b>Monthly Expenses:</b>	
Gross wages, salary, and tips:	_____ \$	Rent or Mortgage:	_____ \$
Unemployment compensations:	_____ \$	Utilities:	_____ \$
Social Security:	_____ \$	Medical Expenses	_____ \$
Child Support:	_____ \$	Other Expenses (please list):	_____ \$
AFDC/TANF:	_____ \$	_____	_____
Food Stamps Grant Letter:	_____ \$	_____	_____
Retirement Income (non-Social Security):	_____ \$	_____	_____
Other Income (alimony, interest, dividends):	_____ \$	_____	_____
<b>Total Monthly Income:</b>	_____ \$	<b>Total Monthly Expenses:</b>	_____ \$

Please detail any special circumstances that we should know about in order to make an informed decision on your case:

\_\_\_\_\_



## **SOUTH SHORE YMCA**

# **Financial Assistance Policy Procedure**

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Financial assistance is made possible by charitable contributions from our Y friends and Y members during the Annual Campaign. If you are interested in volunteering for the Annual Support Campaign, please visit our website for more information: [ssymca.org](http://ssymca.org)

### **Mission Statement**

The South Shore YMCA is a not-for-profit association of individuals dedicated to improving the quality of life for all through programs that promote healthy, spirit, mind, and body. Rooted in Christian tradition and values, the YMCA seeks to serve all people regardless of age, gender, race, religion, or economic circumstances.

### **Policy Statement**

It is the policy of the South Shore YMCA to provide services to all that wish them regardless of their ability to pay. While the YMCA sets fees at rates affordable to the majority of residents in our service areas, financial assistance is available to those who cannot afford the fees. Assistance is awarded based on each applicant's ability to pay and the funds available.

### **Eligibility**

Financial assistance will be granted based on the need demonstrated by household income, expenses and/or extenuating circumstances. Applicants are required to pay a portion of the program fee for which they are requesting assistance. This contribution demonstrates both a desire and a commitment to participate.

### **TRUST and VERIFY Membership Process and Application**

A 30-day TRUST and VERIFY membership will be activated immediately upon filling out the membership application. First payment is as follows: Household \$20, Adult \$20, Senior \$20, Young Adult \$20, Junior \$10.

The monthly payments will change based upon income and expense documentation required within 2 weeks of application date. If you have applied through the TRUST and VERIFY system in the past, you must submit a financial assistance application and wait for approval before activating your membership.

Determinations for Financial Assistance award are based on a TRUST and VERIFY system. All Required documentation must be submitted within 2 weeks of membership activation date. Please attach a copy of your most recent 1040 Federal Tax return and copies of your last 4 consecutive pay stubs. If you are exempt from paying taxes, send verification of income received from federal, state, or local agencies. Please attach a copy of rent or mortgage agreement, utility bills, and other receipts or cancelled checks as needed to complete the form.

### **Approval Process**

Upon receipt of all required documentation, financial assistance applications will be reviewed to determine a monthly fee by the Assistant Director of Member Service within 2 weeks. This information is kept confidential. While waiting for approval we offer TRUST and VERIFY membership for first time applicants. If you have questions regarding this process, please call the Assistant Director of Member Service. Emilson (Hanover) Branch: 781.829.8585 ext. 8308, Quincy Branch: 617.479.8500 ext. 4705.

### **Payment Process**

After notification by the Assistant Director of Member Service, payments for membership should be made at the front desk or mailed to either:

#### **EMILSON YMCA**

**Attention: Assistant Director of Member Services**  
**75 Mill Street, Hanover, MA 02339**

#### **QUINCY YMCA**

**Attention: Assistant Director of Member Services**  
**79 Coddington Street, Quincy, MA 02169**