

## YMCA Health, Fitness and Aquatics **Financial Assistance Application Form**

### **ABOUT Y FINANCIAL ASSISTANCE**

At the Y, we believe that everyone should have the opportunity to live a healthy and active lifestyle with access to our vital health, fitness, child care, camp and recreational activities. Our Y Financial Assistance program is designed to assist those who are unable to afford the full cost of participation.

#### HOW FINANCIAL ASSISTANCE IS DETERMINED

Financial assistance is determined using a sliding scale that is based upon your financial capabilities and an agreement that is acceptable to both you and the Y. Please note: Financial Assistance will only be granted to those with the appropriate documentation, and such documentation must be reassessed at least on an annual basis.

Membership Financial Assistance provides a discount on monthly fees for any Y Membership. Memberships must be activated within 30 days of assessment, and are valid for 12 months unless your financial circumstances change.

#### **HOW TO APPLY**

- Fill in the applicant information on the other side of this document. 1.
- 2. All applicants must bring to their appointment:
  - a. Most recent Federal Notice of Income Tax Assessment (s) for household family members. (To obtain a copy of your Federal Notice of Tax Assessment (T-451) call 1-800-959-8281).
  - b. Pay stubs for the previous 2 months (Only applicable if there has been a change in employment since last tax assessment).
  - Proof of other sources of income (previous 2 months). Examples include: C.
    - Student Finance (OSAP) - Ontario Disability Support Program
- Employment Insurance Payments
- Family Support Payments

- Child Tax Benefit

- Rental Income - Canada Child Benefit (CCB) / Child Support - Ontario Works
  - Canadian Pension Plan or Old Age Pension
- Photo ID to Confirm identity (at least one adult must provide proof). d. Examples include: driver's licence, student card, passport, permanent residency card
- **Proof of residency** e.

Examples include: Lease, mortgage agreement, utility bill or property tax bill, Immigrant Visa and Record of Landing (if applicable).

Method of payment f.

> If applying for a reduction in Membership fees, please provide a void cheque or credit card to schedule your pre-authorized monthly payments.

#### **Y FINANCIAL ASSISTANCE FAQS**

How does the Y determine how much I pay? Once we receive your completed application form and required documents, we calculate your membership fee and/or camp discounts, based on a review of your household income and the size of your household.

How long does the application process take? If you bring ALL required documentation, it is very likely we can review your application at the time you submit it. If we are not able to review your application on the spot, it will be completed within 72 hours. Arranging an appointment is encouraged. All documents must be included before we can review your application.

How do I renew my Y membership? You will be contacted after 11 months of membership, when you will be asked to resubmit your application and documentation which may entitle you for a further 12 months of membership.

How is the Membership Assistance Program funded? Y Financial Assistance is funded by a combination of sources including public and corporate donations and directly from the YMCA of the National Capital Region.



# **YMCA Health, Fitness and Aquatics** Financial Assistance Application Form

## **APPLICANT INFORMATION**

	🗆 New A	pplication 🗆 Re	enewal					
ealth, Fitness & Aquatics Membersh Child (0Y-12Y) Youth (13Y-17Y) or Student (18Y+, full-time with valid student ID)	□ Adult (18Y-5 □ Senior (60Y-	Adult (18Y-59Y)			Household (4 members living at the same residence. Must include one individual 18Y+)			
lousehold size: # of adults	# of children (und	der 18)	Annual Hou	sehold Ir	icome:  \$			
FIRST NAME	LAST NAME	RELATIONSHIP	GENDER	Prefer not to say	PRONOUNS	Prefer not to say	DATE OF BIRT (DD/MM/YY)	
URRENT ADDRESS		CITY			PROV.	POSTAL CO	DDE	
OME PHONE	CELL PHONE			WORK PHO	ONE			
APPLICANT AUTHORIZATION								
ere is correct and complete. In comp apital Region (Y) in writing within 30 Iformation may impact my eligibility	oleting this application f ) days of any material ch for a Y Financial Assista	for Y Financial Assist nange to the inform nce that resulted fro	tance, I agree ation presente om this applic	to inform d here. A ation and	the YMCA o nd I agree th in future ap	of the Na nat any c	tional hange to th	
ere is correct and complete. In comp apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this app	oleting this application f days of any material ch for a Y Financial Assista blication and the review	for Y Financial Assist nange to the inform nce that resulted fro of my eligibility for	tance, I agree ation presente om this applic	to inform d here. A ation and	the YMCA c nd I agree th in future ap nfidential.	of the Na nat any c plicatior	tional hange to th 1s. I further	
ere is correct and complete. In comp apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this app PPLICANT NAME (PLEASE PRINT) <b>Membe</b>	oleting this application f days of any material ch for a Y Financial Assista blication and the review	for Y Financial Assist nange to the inform nce that resulted fro of my eligibility for CANT SIGNATURE <b>vated within 30</b>	tance, I agree ation presente om this applic subsidy comp days of this	to inform d here. A ation and letely cor <b>assessm</b>	the YMCA c nd I agree th in future ap nfidential. DATI	of the Na nat any c	tional hange to th 1s. I further	
ere is correct and complete. In comp apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this app PPLICANT NAME (PLEASE PRINT) <b>Membe</b>	oleting this application f days of any material ch for a Y Financial Assista blication and the review APPLIC	for Y Financial Assist nange to the inform nce that resulted fro of my eligibility for CANT SIGNATURE <b>vated within 30</b>	tance, I agree ation presente om this applic subsidy comp days of this	to inform d here. A ation and letely cor <b>assessm</b>	the YMCA c nd I agree th in future ap nfidential. DATI	of the Na nat any c plicatior	tional hange to th 1s. I further	
ere is correct and complete. In comp apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this app PPLICANT NAME (PLEASE PRINT) Membe Credit tov	oleting this application f days of any material ch for a Y Financial Assista olication and the review APPLIC erships must be acti wards camps must b	for Y Financial Assist nange to the inform nce that resulted fro of my eligibility for CANT SIGNATURE <b>vated within 30</b> of <b>used before th</b>	tance, I agree ation presente om this applic subsidy comp days of this e end of the	to inform Id here. A letely cor assessm calend	the YMCA c nd I agree th in future ap nfidential. DATI	of the Na hat any c plicatior	tional hange to th ns. I further (YY)	
ere is correct and complete. In comp apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this app PPLICANT NAME (PLEASE PRINT) Membe Credit tov	oleting this application f days of any material ch for a Y Financial Assista olication and the review APPLIC erships must be acti wards camps must b	for Y Financial Assist nange to the inform nce that resulted fro of my eligibility for CANT SIGNATURE <b>vated within 30</b> <b>ie used before th</b>	tance, I agree ation presente om this applic subsidy comp days of this le end of the	to inform d here. A ation and letely cor assessm calend	the YMCA c nd I agree th in future ap offidential. DATI <b>DATI</b> ar year.	of the Na hat any c plication	tional hange to th ns. I further (YY)	
ere is correct and complete. In complete, apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this apperent of the contents of this apperent of the contents of this apperent of the content of t	oleting this application f days of any material ch for a Y Financial Assista olication and the review APPLIC erships must be acti wards camps must b	for Y Financial Assist nange to the inform nce that resulted fro of my eligibility for CANT SIGNATURE <b>vated within 30</b> <b>the used before th</b>	tance, I agree ation presente om this applic subsidy comp days of this le end of the	to inform d here. A ation and letely cor assessm calend	the YMCA c nd I agree th in future ap offidential. DATI <b>DATI</b> ar year.	of the Na hat any c plication	tional hange to th ns. I further (YY)	
ere is correct and complete. In complete apital Region (Y) in writing within 30 information may impact my eligibility gree to keep the contents of this apperent of the contents of this apperent of the contents of this apperent of the content of t	oleting this application f days of any material ch for a Y Financial Assista olication and the review APPLIC erships must be acti wards camps must b	Tor Y Financial Assist nange to the inform nce that resulted fro of my eligibility for CANT SIGNATURE <b>vated within 30</b> of <b>used before th</b>	tance, I agree ation presente om this applic subsidy comp days of this e end of the	to inform d here. A ation and letely cor assessm calend	the YMCA c nd I agree th in future ap offidential. DATI eent. ar year. (MM/DD/YY): (MM/DD/YY):	of the Na hat any c plication	tional hange to th ns. I further (YY)	
ere is correct and complete. In complete apital Region (Y) in writing within 30 iformation may impact my eligibility gree to keep the contents of this apperent of the contents of this apperent of the contents of the content of the	oleting this application f days of any material ch for a Y Financial Assista olication and the review APPLIC erships must be acti wards camps must b onfirmation of residency:	For Y Financial Assist nange to the informance that resulted from of my eligibility for CANT SIGNATURE <b>vated within 30</b> <b>be used before th</b> Yes $\square$ No Number of Individuals i	tance, I agree ation presente om this applic subsidy comp days of this e end of the	to inform d here. A ation and letely cor assessm calend	the YMCA c nd I agree th in future ap offidential. DATI ment. ar year. (MM/DD/YY): (MM/DD/YY):	of the Na hat any c plication E (MM/DD/	tional hange to th ns. I further (YY)	
ere is correct and complete. In complete apital Region (Y) in writing within 30 information may impact my eligibility gree to keep the contents of this approximate (PLEASE PRINT) PPLICANT NAME (PLEASE PRINT) FOR OFFICE USE ONLY Processed by: Verified by: Confirmation of ID:  Yes  No Control Annual Household Income:	oleting this application f days of any material ch for a Y Financial Assista olication and the review APPLIC erships must be acti wards camps must b onfirmation of residency:	for Y Financial Assist nange to the informance that resulted from of my eligibility for CANT SIGNATURE <b>vated within 30</b> <b>the used before th</b> Yes No Number of Individuals in Transacted in Xplo	tance, I agree ation presente om this applic subsidy comp days of this e end of the in Household:	to inform d here. A ation and letely cor assessme calend Date	the YMCA c nd I agree th in future ap offidential. DATI <b>DATI</b> (MM/DD/YY): (MM/DD/YY):	of the Na hat any c plication	tional hange to th is. I further (YY)	