

Frequently Asked Questions

Q. Is it possible to join the YMCA for free?

A. The YMCA believes a strong sense of ownership and pride is developed when the financial assistance recipient contributes to the cost of their involvement. Therefore, all applicants will be asked to pay their fair share portion.

Q. If I receive YMCA financial assistance, what is expected of me?

A. Upon approval of a scholarship, a YMCA staff member will review the conditions of the agreement with you. Those conditions may include length of the scholarship, the expectation that you take full advantage of the assistance by using the membership or service regularly, as well as a commitment to make payments on time.

Q. How quickly can I expect to be approved?

A. Once your application and required documents have been submitted to the YMCA, we will contact you by mail within 15 business days. Applications will not be considered for scholarship if it is incomplete or missing appropriate paperwork and documentation.

Q. How long will my scholarship last?

A. Need of assistance is assessed at time of request and reviewed on an annual basis.

Q. How often can I apply for a Scholarship?

A. If you are terminated for non-payment of a membership you can reapply in six months. You may also reapply for financial assistance at your one-year renewal date.

Q. Will I always pay the same amount for a program or membership?

A. No. Each application is looked at on an individual basis. Our fee scale assists us in determining your award amount. However, assistance is given based on need and funds available.

YMCA MISSION

To put Christian principles into practice through programs that build a healthy spirit, mind and body for all.



*We build strong kids,
strong families,
strong communities.*

Benton Harbor-St. Joseph YMCA Family Center
3665 Hollywood Road
St. Joseph, Michigan 49085
Phone: 269-428-YMCA (9622)
Fax: 269-429-5482
www.bhsjymca.org



FINANCIAL ASSISTANCE PROGRAM



A beginning to a healthier,
happier tomorrow!

Benton Harbor-St. Joseph YMCA Family Center

3665 Hollywood Road
St. Joseph, MI 49085

269-428-YMCA (9622)
www.bhsjymca.org

Welcome to the YMCA Scholarship Program!

The Benton Harbor-St. Joseph YMCA Family Center is available for the benefit and enjoyment of all who live and work in our community. For the past 80 years, people have trusted the YMCA to provide quality programs and activities in the communities we live in.

The Financial Assistance Program provides families and individuals in need of financial support to participate in membership and program activities.

The YMCA knows that people prefer to accept responsibility and pay full registration fees when they are able to afford them. But when financial difficulties stretch individual and family budgets to thin, the need for YMCA programs remain, and in some instances may be even more crucially needed.

YMCA Financial Assistance... A Community Partnership

As a non-profit organization, YMCA programs are subsidized by contributions given by individuals, companies, foundations, and our annual strong kids campaign. These generous contributions make possible the Financial Assistance Program. Whereby those who are unable to afford fees may, upon their request be awarded scholarship.

How Do I Apply?

Complete the application in this brochure, attach the required documentation and return it to the Member Service Desk. Applications will not be considered for assistance if it is incomplete or missing appropriate paperwork and documentation.

Determination and Notification

Your YMCA Financial Assistance Coordinator will review your financial information and, based on a sliding fee scale, determine the amount of assistance that will be offered to you. Processing can take up to 15 days. We will notify you by mail via a notification letter of your rate. Once you receive your notification, you must bring your letter to the membership service desk to sign up for membership or program within 30 days. You must reapply if you do not activate your membership before 30 days.

Forms of Payment

It is our policy that financial assistance payments are done by bank draft. To start your bank draft, bring a canceled or voided check or deposit slip with your notification letter to the member service desk.

If you do not have a bank account, you can still make your cash payment at the Member Service desk. However, a \$5.00 processing fee [per payment] will apply.

YMCA: A Brief History

The YMCA is the largest non-profit community service organization in America. It is the heart of community life in neighborhoods and towns across the nation. The YMCA works to meet the health and social needs of 12.6 million men, women, and children.

YMCA's across the world work to strengthen families and to help people develop values and behavior that are consistent with Christian principles. YMCA's welcome people of all faiths, races, abilities, and incomes.

The Benton Harbor – St. Joseph YMCA Family Center has been serving the needs of our community for over 80 years. With a membership of over 3000, the YMCA not only provides excellent facilities for health and fitness, but also offers more than 70 programs and classes for people of all ages.

Thousands of people depend on the YMCA for programs and services; it is our YMCA policy to make facilities and programs accessible to everyone. YMCA Membership and financial assistance open up a world of programs and activities for you and your family.



By becoming part of the YMCA Family, you'll be a part of an organization committed to building strong kids, strong families, strong communities.

Benton Harbor-St. Joseph YMCA Family Center
Financial Assistance Application



| |
|--|
| OFFICE USE ONLY: Date Received: _____ Renewal: _____ Verification Collected: _____ |
|--|

◀ **Please provide the following proof of income:**

- Copy of previous year's Tax Return (Example: 1040, 1040A, 1040EZ) If not available, a letter stating why.
- Two recent pay stubs
- Unemployment or Social Security Benefits statements
- Child Support
- Verification of any other assistance received (Example: housing assistance, food stamps)

All information is maintained confidentially.

Female ____ Male ____

◀ **Applicant Information**

| | | | |
|--------------|-----------|--------------------|-------------------|
| Last Name | MI | First Name | |
| Home Address | | | Apt # |
| City | State/Zip | | Date of Birth / / |
| Home Phone | | Cell Phone | |
| Member ID | | Driver's License # | |

Are you a current YMCA Member? Yes No If so, which YMCA? _____

Desired Membership Type: Adult Family Youth Teen

Ethnic Origin: White Black Asian or Pacific Islander American Indian or Alaska Native Unknown/Other _____

Members in family-LISTED AS DEPENDENTS ON TAX RETURN: (Please list additional members on back).

| First Name | MI | Last | DOB / / | Relationship |
|------------|----|------|---------|--------------|
| | | | | |
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| | | | | |
| | | | | |

◀ **Income:**

| | | |
|----|--|-------------------------------|
| \$ | | Gross Monthly Income |
| \$ | | Spouse's Gross Monthly Income |
| \$ | | Child Support |
| \$ | | Aid to Dependent Children |
| \$ | | Welfare (Submit Copy) |
| \$ | | Food Stamps |
| \$ | | Other |
| | | |
| | | |
| | | |

◀ **Expense:**

| | | |
|----|--|---------------------------------|
| \$ | | Rent/Mortgage (Circle One) |
| \$ | | Auto/Loan |
| \$ | | Utilities |
| \$ | | Phone |
| \$ | | Child Support |
| \$ | | Medical |
| \$ | | Child Care |
| \$ | | Other (i.e. bills, other loans) |
| \$ | | Food |
| \$ | | Transportation |

| |
|---|
| OFFICE USE ONLY: Processed by: _____ Date Processed: _____ Membership Type: _____ Monthly Rate: _____ Joiner's Fee: _____ Total Amount Due: _____ Executive Director: _____ |
|---|

\$ _____ **TOTAL MONTHLY INCOME**

\$ _____ **TOTAL MONTHLY EXPENSE**

\$ _____ **ANNUAL GROSS HOUSEHOLD INCOME**

Additional information you would like to be considered: _____

How much can you afford to pay: \$ _____ Per Month

I affirm that the information I have provided is accurate. I understand that if my application is approved, my assistance will be reviewed on at least an annual basis and adjusted based on my circumstances at that time.

 Signature Date

We reserve the right to perform a criminal background check.

This application will be reviewed within 15 business days.