



YMCA of Greater Westfield, Inc. Financial Assistance Application

PLEASE PRINT ALL INFORMATION **Circle One: Membership** **Camp Shepard** **Program** **Y's Kids**

Date of Application: _____

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____ Age: _____

Place of Employment: _____ How Long : _____

Spouse/Child(ren) Name: _____ Age: _____ Relationship: _____ Date of Birth: _____

Are you a single-parent household? YES NO

Application for financial assistance for: Family Adult Youth Other

Intended recipient of scholarship other than family: _____

Have you ever applied for financial assistance at this YMCA before: Yes No

If yes, membership expires? _____

What benefits do you see in having this scholarship? _____

Why are you applying for financial assistance? _____

Other information you would like us to know: _____

Household members and gross monthly income

Name of all persons living in house	Gross Monthly Earnings (job 1)	Monthly Welfare, Child Support, Alimony...	Other Income/ Gov. Support	Monthly Pension, Retirement, SS...	Gross Monthly Earnings (job 2)

Total Gross Monthly Income \$ _____

Expenses (monthly):

- Rent/Mortgage \$ _____
- Utilities \$ _____
- Food \$ _____
- Clothing \$ _____
- Phone \$ _____
- Car/Insurance \$ _____
- Alimony \$ _____
- Child Support \$ _____
- Medical \$ _____
- Other \$ _____

- TOTAL EXPENSES** \$ _____

NOTE: You must attach last year’s tax return and/or four (4) of your last pay stubs to document income for each household member. Proof of income must be attached to this application or it will not be processed.

I hereby authorize investigation of all statements contained in this application. I certify that the information provided herein is true and understand that willful misrepresentation or omission of facts called for in this application may jeopardize my status as a scholarship recipient. I also understand that if awarded, abuse of this scholarship will result in revocation.

Signature

Date

<p>FOR OFFICE USE ONLY Circle One: Membership / Y’s Kids / Camp Shepard / Program- _____</p> <p>_____</p>
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