



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

WELCOME TO ALL

Open Doors Financial Assistance Application

WE ALL NEED THE Y.

There's no place quite like the Y. We're a vital part of the Sumter community; a welcoming place to learn new skills, connect with others, and access support in times of need. Our unique combination of services enriches the well-being of people of all ages and walks of life. As a nonprofit organization, we never turn anyone away who needs us. We need your financial support to continue to keep that promise.

OUR COMMITMENT TO OUR COMMUNITY

We are a non-profit organization committed to helping people grow in spirit, mind and body. We are here to serve people of all ages, backgrounds, abilities, races, genders and incomes. The Open Doors program is made possible by generous donations to the annual campaign from local individuals and businesses who believe in our mission.

APPLICATION INSTRUCTIONS

- Complete the following application in full
- Include copies of household and income documentation
- Return the application with ALL necessary documents to the YMCA.

All persons to be included on the membership must be listed on tax documents as dependents. If a spouse is listed on tax documentation and you are applying for Single Parent Family Household you must provide documentation of separation or divorce.

All applications and information will be kept confidential. You will be notified in writing or via email within 14 days of any scholarship you may receive.

Staff receiving application: _____ Date: _____



1 Applicant Information

Name	DOB	Gender	Marital Status
Street Address	City	State	Zip
Home Phone	Cell Phone	Email	
Employer	How long have you been employed here?		

2 All Persons Living In This Household

Spouse Name (if applicable)	DOB	Gender	Marital Status
Cell Phone	Email		
Employer	How long have you been employed here?		
Dependent Name	DOB	Gender	Relationship to Applicant
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* Must show proof of dependency for all dependents. Without verification, dependents will not be added to the membership.

3 I Am Applying For

Membership

- Teen
- College
- Adult
- Family
- Senior
- Senior Couple
- Single Parent Household

Program

- Afterschool
- Camp
- Aquatics
- Athletics

4 To Qualify For Assistance, Provide The Following Documents

- Proof of Yearly Income (Current Federal Tax Income Return)
- Provide 30 days of income verification
- Proof of Rent / Mortgage and Electric Bills
- Copy of state issued photo ID
- Proof of residency (where you live)
- Proof of Unemployment Compensation and/or Social Security Benefits
- Proof of Food Stamps (Household Summary **AND** Benefit Form, will not be processed without)
- Proof of Dependency – Please provide a birth Certificate WITH applicant’s name listed, or tax return listing dependents, or documentation from DSS / Medicaid with proof of dependency.
- Please provide all proof of income within the household. If no income is provided, whomever provides for your expenses will need to provide verification of their income.

I hereby certify that the information supplied herein is true, accurate and complete to the best of my knowledge. I am also aware that it is my responsibility to notify the YMCA in writing of changes in information given in this application such as income, address, living arrangements, marital status or other matters that might affect my eligibility for financial assistance. I understand that failure to comply with YMCA policies can and may result in immediate suspension of membership and program privileges.

Signature

Date

For office only:
Annual Income - \$ _____
Membership % - _____
Program % - _____
Expiration date _____