



## YMCA of the Palouse Financial Assistance Application

Applicants are required to provide income verification for all adult household members and dependency proof for each child to qualify for Financial Assistance. Memberships and program assistance are reviewed EVERY semester (Fall, Spring & Summer) to confirm ongoing eligibility. Additionally, it is imperative that any material changes in financial circumstances be communicated to the YMCA promptly. The Board reserves the right to disqualify any financial aid if it is discovered that information was intentionally withheld or misrepresented. This measure ensures the integrity and fairness of the Financial Assistance Program.

Please provide the following information:

### Basic Information

<b>Youth Participant Name:</b> _____	<b>Applicant Name:</b> _____
<b>Address Line 1:</b> _____	<b>Home Phone:</b> _____
<b>Address Line 2:</b> _____	<b>Cell Phone:</b> _____
<b>City/State:</b> _____	<b>Email:</b> _____
<b>Zip:</b> _____	<b>Currently Enrolled?</b> _____
<b>Program:</b> _____	<b>Semester/Year:</b> _____

Have you previously applied for financial assistance from the YMCA of the Palouse?      Yes  No

### Household Members

**Adult/Parent/Guardian:** \_\_\_\_\_

**Adult/Parent/Guardian:** \_\_\_\_\_

**Child:** \_\_\_\_\_

**Child:** \_\_\_\_\_

**Child:** \_\_\_\_\_

**Child:** \_\_\_\_\_

**Child:** \_\_\_\_\_

**Child:** \_\_\_\_\_

**Who Has Custody of the child(ren)?** \_\_\_\_\_  
**Do Parents/Guardian share childcare costs?** \_\_\_\_\_

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**Monthly Income & Expenses**

Please list all monthly income from ALL sources:

Monthly Income	
<b>Your Gross Income:</b>	\$ _____ .00
<b>2<sup>nd</sup> Adult's Gross Income:</b>	\$ _____ .00
<b>3<sup>rd</sup> Adult's Gross Income:</b>	\$ _____ .00
<b>Child Support:</b>	\$ _____ .00
<b>Aid to Dependents:</b>	\$ _____ .00
<b>Welfare:</b>	\$ _____ .00
<b>Alimony Received:</b>	\$ _____ .00
<b>Food Stamps:</b>	\$ _____ .00
<b>Social Security:</b>	\$ _____ .00
<b>401K/Retirement:</b>	\$ _____ .00
<b>Investment Income:</b>	\$ _____ .00
<b>Other:</b>	\$ _____ .00
<b>Total Income:</b>	\$ _____ .00

**Required Documentation**

Please provide the following documentation, which is required to process your application:

- The last 2 pay stubs for all adults in the household.
- Your current rental agreement or mortgage statement.
- A copy of last year's federal tax forms for all household incomes.\*

*\*If you DID NOT file federal taxes last year, we will accept bank statements from checking and savings accounts for the last 3 months for all adults in the household.*

**Optional Documentation**

If you wish, you may attach a signed letter to provide more information or explain any extenuating circumstances not included in this application.

**Certification Statement**

**I certify that all information on this application is true and complete to the best of my knowledge. I hereby agree to notify the YMCA of the Palouse if there are any changes to my financial situation within 5 business days.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

You may return this form in person or email it to [info@palouseymca.org](mailto:info@palouseymca.org). Should you have any inquiries about Financial Assistance or wish to learn more about program rates, please do not hesitate to reach out via [info@palouseymca.org](mailto:info@palouseymca.org) or call us at (509) 332-3524. Our team is here to support and guide you through the application process.

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