

CAMPERSHIP ASSISTANCE POLICY

The purpose of the Lake County YMCA states that no one will be turned away due to an inability to pay Y fees. Those who qualify may be awarded assistance. The intent of this policy is to be accomplished by the setting of fees at rates affordable to the majority of residents in the service area and by providing financial assistance to those for whom the YMCA's fees are not affordable. Those not able to pay a fee may be awarded assistance.

ELIGIBILITY

1. Applicants should reside in Lake County YMCA branch service areas and apply to the YMCA Branch nearest their residence.
2. Assistance will be granted on the basis of financial need.
3. The YMCA believes a strong sense of ownership and pride is developed if the financial assistance recipient has contributed to the cost of their YMCA involvement. Therefore, applicants will normally be asked to pay a portion of the membership fee.
4. Financial assistance can be granted for a six-month period. At the end of this period applicants may reapply for assistance.

CAMPERSHIP ASSISTANCE FUNDS

Financial Assistance Funds are available thanks to the generosity of the United Way and friends of the YMCA through their contributions to our annual fund.

YMCA MISSION

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

Please use this area to provide circumstances that support your request for assistance.

Lake County YMCA

Campership ASSISTANCE APPLICATION

WEST END BRANCH
 37100 Euclid Avenue
 Willoughby, OH 44094
 440-946-1160



YMCA

We build strong kids,
strong families, strong communities.

www.lakecountyyymca.org

**Campership ASSISTANCE
LAKE COUNTY YMCA ASSISTANCE APPLICATION**
(To be completed by parent or guardian if applicant is under 18)

While the YMCA is a nonprofit agency, we depend on participant fees to help maintain our services. We are committed to serve people regardless of their income level, but expect participants to pay a fee based on their financial ability. YMCA financial assistance will be awarded to qualified applicants contingent upon financial resources of the Association and verification of application information.

APPLICATION STEPS

1. Fill out this application form completely, sign and date and return to the branch closest to your residence.
2. Provide a copy of the first page of your Federal 1040 tax return from the previous year.
3. Provide a copy of payroll stubs for the past month (if applicable)
4. Provide copies of granted assistance (Medical, SSDI, SSI, OWF, Unemployment & food stamps)
5. Application will be reviewed and kept in strict confidence.

PLEASE PRINT CLEARLY	LAST NAME	FIRST NAME	DATE OF BIRTH	HOME TELEPHONE #
	ADDRESS		CITY	COUNTY STATE ZIP
	MARITAL STATUS: SINGLE MARRIED		ARE YOU INTERESTED IN VOLUNTEERING? YES - NO	RACE
	# OF CHILDREN _____		YMCA MEMBERSHIP NUMBER:	
Type of membership you have (Circle One). Adult Youth Family				

INCOME	NO	YES	\$ PER MONTH
1. Are you receiving OWF? (Ohio Works First)			\$
2. Are you receiving food stamps?			\$
3. Are you receiving social security benefits?			\$
4. Are you receiving veteran's or retirement benefits?			\$
5. Are you receiving child support?			\$
6. Is any Household member receiving any additional financial support?			\$
7. Is any household member receiving unemployment benefits?			\$
8. Total household employment income? (gross payroll)			\$

List names & birthdays and age of children, camp name and requested session/week number for campership.
On the back, please provide circumstances that support your request for assistance.

Name	Birth Date and AGE	Camp Name	

Please read the following: I certify that the information supplied herein, is true, accurate and complete to the best of my knowledge. I am also aware that I am responsible for notifying the Lake County YMCA, in writing, of any changes to information supplied in this application such as income, address, living arrangements, or other matters which might affect my eligibility for financial assistance. I understand that failure to comply with YMCA policies can result in immediate revocation of assistance privileges.