

VALLEY SHORE YMCA

WESTBROOK, CT

Financial Assistance Application

You belong at the Y, no matter what your financial situation.

EVERYONE IS WELCOME

The YMCA welcomes all who wish to participate and believes that no one should be denied access to the Y based on their ability to pay. Through the Annual Campaign, the Valley Shore YMCA provides assistance to youth, adults and families based on individual needs and circumstances. Determining your level of support is handled in a fair and consistent manner. Every YMCA member receives the same membership benefits, regardless of whether or not they receive scholarship assistance.

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Valley Shore YMCA Financial Assistance Application

| rst Name: Middle Name: | | Middle Name: | Last Nam | | | ne: | | | | |
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| Birth Date: / | / | Gender: | □Male | | □Female | | □Rather n | ot say | □Other: | |
| Preferred Phone: | | Email Addres | S: | | | | | | | |
| Address: | | City/ | Town: | | | | State: _ | | Zip: | |
| Emergency Contact N | ame: | | | | Emergency C | ontact Pł | none: | | | |
| All Persons Liv | ing in the Househo | ld: | | | | | | | | |
| Place a check mark ✓ I | next to the name of each h | | | | | | • • • • • • • • • • • | • • • • • • • | ••••• | LA |
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My Suggested Membership Fee:

You know your family's financial situation better than we do. As you consider your family's financial situation, please also refer to our membership rates for which you are applying. Please write below the amount you and your family can pay each month for the membership you are seeking. We may not be able to accommodate your suggested fee, but we will try our best to ensure your rate is affordable.

\$_____ per Month.

Applicant's Signature:

- I certify that the above information is true and complete to the best of my knowledge, and that I do not have additional income not represented above. I agree, if necessary, to send additional information and documentation to support the above statements.
- I understand that scholarship assistance is based on need. In the event that I or my children must cancel our participation, I will contact the YMCA immediately so scholarship can be provided to others.
- I understand that if I falsify any of the above information, I will not be eliqible for assistance now and/or in the future.
- Financial aid recipients will be responsible for a portion of their dues. Their awards will be reviewed annually. Although we send reminders at the end of a term, it is the member's/participant's responsibility to reapply for financial aid. If assistance is not renewed by its expiration date, memberships will be set to terminate awaiting member's decision to resubmit application or to resume billing at the full rate.
- By submitting this application, you agree to these terms. Please allow 3–5 business days for processing. Written notification of the award will be sent via email.

| Signatu | re of F | Person | Comp | letina | this | form |
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Date

Other Information:

We understand that everybody is unique and faces different obstacles and challenges. If you would like to provide additional details below, this section is optional but may help us with processing your application:

> Other Financial Assistance Partnerships with Valley Shore YMCA:







Care 4 Kids helps low to moderate income families in Connecticut pay for childcare costs. This program is sponsored by the Connecticut Office of Early Childhood.

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DOD MILITARY OUTREACH INITIATIVE





The Valley Shore YMCA and the Armed Services YMCA are proud to work with the Department of Defense to administer the Military Outreach Initiative. Established in 2008, the Military Outreach Initiative offers no-cost fitness facility memberships and respite childcare services for eligible active-duty military and their families nationwide. This initiative provides access to vital resources that promote mission readiness and family resilience.

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| OFFICE USE ONLY: | APPROVAL DATE: | | EXPIRATION DATE: | | |
|----------------------------|----------------|--------------------------|------------------|--|--|
| STAFF NAME: | | | | | |
| APPROVED SCHOLARSHIP TYPE: | | MONTHLY MEMBERSHIP RATE: | | | |



The Valley Shore YMCA provided over \$120,000 in financial assistance and program subsidies to more than 1,200 local youth and families in the shoreline community. Our community requires more support than ever to cover the needs of seniors and working families in our community. There are three critical needs that our financial assistance program strives to address:

- 1. Provide additional financial support for seniors through membership and specialty health programs: As our population ages, more seniors are looking to the YMCA for socialization and activity to ensure they can live healthier for longer. Programs range from supporting seniors through workshops and programs to accommodate the special health needs of older adults to activities such as aquatics exercise and triathlons.
- 2. Increase assistance for working families: Many of the families who support CT Shoreline's retail and vacation economy are working multiple jobs at minimum wage and living on survival budgets. The YMCA offers a chance to improve the quality of life for families through childcare, camping, family activities, and wellness programs. We believe that these programs are not luxuries, but rather necessities for a healthy community.
- **3. Make sure every child knows how to swim:** Drowning is the second leading cause of death in children, and we are committed to ensuring children on the Shoreline have the skills to be safe around water. This year, we are expanding our efforts to provide free or subsidized lessons to even more children in each of the towns we serve.

Inspiring the Connecticut River Valley



201 Spencer Plains Rd Westbrook, CT 06498 (860) 399-9622

P: (860) 399-9622 E: VSYMCA@VSYMCA.ORG

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