

Signed:

FINANCIAL ASSISTANCE APPLICATION

The Y provides financial assistance, to the extent possible, to those in need. Proof of income is required and eligibility is determined by comparing your gross annual household income to the YMCA Sliding Fee Scale based on the 2015 Poverty Guideline. We also take into consideration the number of people supported by your income. Assistance will be granted on a first come, first served basis and will be granted for a maximum of one session per camper per summer.						
Yes, my household receives% Financial Assistance from the branch of the YMCA of Metropolitan Chattanooga. *If you answered yes, you will be considered to receive the same % of assistance, up to 70%, toward your program fees. Complete only Sections 1, 2, and 4 and submit along with your program registration form and a \$25 deposit.						
If you do not receive financial assistance from a branch of the YMCA of Metropolitan Chattanooga, please proceed with the entire application as outlined below. Submit this application, income documents, registration form and deposit together to the James A. Henry YMCA Office: 615 Derby Street, Chattanooga, TN 37404. Please direct questions to: jboswell@ymcachattanooga.org.						
Section 1. PARENT OR GUARDIAN (or Primary if over 18)						
Legal First Name			MI	Legal Last Name		
2 nd Adult in Household Legal First Name			MI	Legal Last Name		
Address			Apt	City/State		Zip
Best Contact Phone Number Email Ad (REQUIR						
Section 2. ASSISTANCE REQUEST						
Participant's/Child's Legal First Name			MI	Participant's/Child's Legal Last Name		
2 nd Participant's/Child's Legal First Name MI				Participant's/Child's Legal Last Name		
Section 3. INCOME VERIFICATION						
					Applicant	2 nd Adult (if applicable)
Household Income	Gross Household Monthly Income (before taxes)				\$	\$
	Noveles of Adults are sated by allows because			Number of Children supported by above income:		
	Following Last two months of bank statements					
Attach the						
Documents						
(for each	☐ Most recent unemployment check stubs					
adult in	☐ Statement of Free or Reduced Lunch for your child					
household) An official letter from a case manager or similar such authorities if you are unemployed, not receiving benefi participating in a structured job training or rehabilitation program, or are homeless or living in a homeless sh						_
**If you feel that you have extenuating circumstances not evidenced by the above information, you may submit a statem explaining your current situation. Please attach it to your application with the above income verification.						
Section 4. SIG						
I certify that the above information is true and complete to the best of my knowledge. I understand the above agreement and my obligations. I further understand that the YMCA's policy for payment applies to this agreement.						

Date: