



YMCA

We build strong kids,  
strong families, strong communities.

**GREATER MISSOULA FAMILY YMCA**  
**3000 S. RUSSELL ST. MISSOULA, MT 59801**  
**406-721-YMCA (9622) • FAX: 406-721-9226**  
**[www.ymcamissoula.org](http://www.ymcamissoula.org)**

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## **FINANCIAL ASSISTANCE FOR INDIVIDUAL MEMBERSHIP INFORMATION & APPLICATION**

Dear Applicant:

Thank you for your interest in becoming a member of the Missoula Family YMCA! It is a practice of YMCAs across the country to provide financial assistance for programs and membership. At the Missoula Family YMCA we are proud to offer financial assistance to single adults to assist them in becoming members. Through the development of the **Financial Assistance for Individual Membership** program, many more people are able to enjoy the benefits of membership at the Missoula Family YMCA.

The Financial Assistance for Individual Membership program was implemented to assist single adults who have an annual gross household income of less than \$20,000 to become members of the YMCA. Applicants who qualify for the Financial Assistance for Individual Membership program receive financial assistance with both the Joiner Fee and the Monthly Fees. In order to assist us in determining if you meet the guidelines for membership financial assistance, please complete the attached application form found on page 3. On page 2 of this packet is a list of the specific information that must be included with your application in order for us to determine eligibility for the Financial Assistance for Individual Membership program. Applications for financial assistance are processed on a weekly basis. You will be notified once your membership has been approved. Approved applications are kept on file for 30 days (after 30 days applications will be destroyed). *Please note: we reserve the right to deny financial assistance for memberships based on insufficient/incomplete applications and/or based on sufficient subsidy/income.*

At the Missoula Family YMCA, we encourage all members to become active participants within the facility and programs, as well through volunteer opportunities. As a means for you to be part of the YMCA and help in saying thank you for the many individuals who have donated funds to make the Financial Assistance for Individual Membership program possible, we ask that you consider volunteering at the YMCA. Volunteer applications can be picked up at the Welcome Center or obtained on line.

Again, thank you for your interest in becoming a member of the Missoula Family YMCA. If you have questions or if we may be of assistance, please contact us via telephone or in person.

Sincerely,

Amber B. Taylor  
Membership Associate Director

Kimberly F. Haugen  
Membership & Marketing Director

## **FINANCIAL ASSISTANCE FOR INDIVIDUAL MEMBERSHIP INFORMATION**

In order for us to process your application for Financial Assistance for Individual Membership program, please complete the Financial Assistance for Individual Membership Application Form found on the next page. Also, with your application, please include a copy of **all** of the following information that applies:

1. Income tax return for previous year (previous two years if you are self employed)
2. Current wage stub including year-to-date income, hourly pay and number of hours worked
3. Benefit letter or copy of check for SSI/SSDI
4. Benefit letter or copy of check for Workmen's Compensation
5. Benefit letter for food stamps
6. Benefit letter for subsidized housing
7. Copy of current University of Montana (or other school) registration showing expenses
8. Copy of award letter for school financial assistance (loans and grants)
9. Current statement of Revenues Collected & Expenditures Paid if you are self employed

YMCA members through the Financial Assistance for Individual Membership program are required to provide income verification on a **yearly** basis whether financial information has changed or not. We reserve the right to deny a Financial Assistance for Individual Membership based on insufficient verification or sufficient subsidy/income.

**PLEASE KEEP THIS INFORMATION FOR YOUR RECORDS.**

## FINANCIAL ASSISTANCE FOR INDIVIDUAL MEMBERSHIP APPLICATION FORM

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Employer: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

***Please complete the following information:***

<b>MONTHLY INCOME</b>	
Employment Income-Applicant	\$
Food Stamps	\$
Workman's Compensation	\$
SSI/SSDI	\$
Grants/Loans	\$
Other (please specify):	\$
Other (please specify):	\$
Other (please specify):	\$
Other (please specify):	\$
Other (please specify):	\$
Other (please specify):	\$
<b>Total Monthly Income:</b>	<b>\$</b>

Please list the name and telephone number of a reference (other than a family member) who can verify your income:

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

*I understand that this application will be reviewed by the Missoula Family YMCA Membership Review Committee and will take seven (7) days to process. I further understand that I am responsible for notifying the Missoula Family YMCA of any changes in my financial status and will provide, annually, current proof of income from all sources.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### STAFF USE ONLY

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_     Application approved; Date applicant notified: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Denied Date: \_\_\_\_/\_\_\_\_/\_\_\_\_    Explanation: \_\_\_\_\_  
 Incomplete application; information pending: \_\_\_\_\_ Date applicant notified: \_\_\_\_/\_\_\_\_/\_\_\_\_