

Financial assistance requested for:

- Membership
- Program
- Camp
- Preschool

(If applying for Camp or Preschool, you must first apply through the state and provide a denial letter; [www.access.wisconsin.gov](http://www.access.wisconsin.gov))

Branch:

- Janesville
- Parker

Have you ever applied for financial assistance before?

- Yes
- No

If yes, please state what the assistance was for and at which Y: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Why are you applying for financial assistance?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE READ CAREFULLY AND SIGN:**

In completing this application and signing it, I certify that all of the information supplied to the Y is true, accurate and complete to the best of my knowledge.

I am also aware that it is my responsibility to notify the Y, in writing, of any change in information supplied in this application, such as income, address, phone number, or other matters which might affect my eligibility for financial assistance.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**THE Y IS A VOLUNTEER BASED ORGANIZATION.**

Please consider volunteering your time to help the Y. Contact us at 608-754-9622 for a list of current volunteer opportunities.

**Financial assistance helps to ensure that everyone belongs at the Y, regardless of income level.**

The Y has a pricing model that makes membership affordable through a variety of contributions to the Y's annual campaign. Collectively, we can make a difference and an impact for healthier living in spirit, mind, and body for all. With the help of our community, we stay committed to being an affordable place where everybody can come exercise, play and connect with others.



**YMCA of Northern Rock County**

**CONTACT: Tina Rogstad**

608-754-9622 ext. 117

[trogstad@ymcajanesville.org](mailto:trogstad@ymcajanesville.org)

221 Dodge Street

Janesville, WI 53548



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# MEMBERSHIP FOR ALL

## FINANCIAL ASSISTANCE

YMCA of Northern Rock County



**"I have found myself feeling stronger and healthier than I have in years. Thank you for the wonderful opportunity you have given me."**

- Financial Assistance Recipient



**EVERYONE  
BELONGS  
AT THE Y!**

The Y believes that everyone deserves the chance to succeed. Regardless of your financial situation, we will work with you to receive all the benefits of our membership. Through the generosity of donors, we are able to provide programs and services to those who may not otherwise be able to participate.

**Applying for financial assistance is easy and confidential!**

**HOW TO APPLY:**

- Complete the attached application
- Submit proof of income documents
- Once your application has been processed, you will be contacted via mail with the status of your application

(Please allow 2 weeks for processing)

**PAYMENT OPTIONS:**

- Automatic monthly draft
- Full year payment can be made at any time

**“Since joining the Y in 2004 with the help of financial assistance, I have lost 137lbs...I am greeted by the laughs of happy children having fun with their parents, and adults and seniors connecting with their friends which now extend beyond the walls of the Y.”**

- Financial assistance recipient

**FINANCIAL ASSISTANCE APPLICATION**

Name \_\_\_\_\_ DOB \_\_\_\_\_

Spouse \_\_\_\_\_ DOB \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Place of Employment \_\_\_\_\_

Place of Spouse’s Employment \_\_\_\_\_

Additional Family Members :

Name:	Relationship	Date of Birth

**PROOF OF INCOME: (Application will NOT be processed without proof of income.** Please include the following documents for all adults on the account.)

- Last years Federal IRS 1040 Form (must be submitted with initial application, as well as submitted annually)
- Most recent pay stubs (two for each adult)
- Other documentation (i.e. Unemployment, Social Security)

(If you do not have a copy of your most recent tax return or did not file income taxes last year, you may obtain a copy of your most recent taxes or a letter of verification by calling the IRS at (800) 829-1040 or at [www.irs.gov](http://www.irs.gov))

**MONTHLY GROSS INCOME (PRE-TAX):**

Wages, Salaries and Tips	\$ _____	Food Share	\$ _____
Unemployment Compensation	\$ _____	Social Security Benefits	\$ _____
401 K/Retirement Funds	\$ _____	Other Income	\$ _____
Child Support	\$ _____	Total Monthly Income	\$ _____

If your income does not accurately reflect your situation, please explain: \_\_\_\_\_

(Continued on reverse)