



# Ligonier Valley YMCA Financial Assistance Form

DATE: \_\_\_\_\_  FIRST TIME APPLICANT  RENEWAL APPLICANT

APPLICANT'S NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

HOW MANY ADULTS IN HOUSEHOLD? \_\_\_\_\_

MARITAL STATUS:  Single  Married  Separated  Divorced  Widowed

FINANCIAL ASSISTANCE REQUESTED FOR:

**PROGRAMS:**

Youth Sports  Aquatics  Child Development

**MEMBERSHIP:**

Adult  Family  Single Parent Family  Youth  Senior  Senior Couple

**FAMILY MEMBERS:** (MUST be listed as dependents on tax return)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

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**PLEASE WRITE A SHORT STATEMENT IN YOUR OWN WORDS INDICATING YOUR FINANCIAL NEED FOR OBTAINING A LIGONIER YMCA SCHOLARSHIP.**

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Signature of Applicant

**Must Be Completed By Applicant**

**Income Information - Gross Income**

Wages, Salaries and Tips	\$
Unemployment Compensation	\$
Social Security Compensation	\$
Child Support	\$
Food Stamps	\$
Alimony	\$
Other	\$
<b>Total Monthly Income</b>	<b>\$</b>

**The following documentation must be provided in order to process the application:**

- Federal Income Tax Return/W-2s
- Copies of Proof of ALL household income (Including three current paystubs, letter of assistance from SSI or unemployment, cash assistance and food stamps documentation.)

The review process can take up to two weeks. Applicants will be notified by mail.