



YMCA of Greater Tulsa

Membership For All Plus



The YMCA of Greater Tulsa Membership For All Plus was created in order to insure the YMCA services are accessible to all members of the community, and that no one is excluded because of the inability to pay the stated dues.

The goal of the YMCA Membership For All Plus flows from its Mission statement, which defines the YMCA as an association of "...boys, girls, men, and women of all ages, ethnic origins, religious affiliations and socio-economic levels..." By eliminating the financial barrier, the YMCA makes its programs and activities available to a population that reflects the diversity of the society it was founded to serve.

The criteria for eligibility are based on family situation and income. Children ages birth to 24 that are still claimed as dependents on their parents tax return must have this application filled out in full and submitted by their parent(s). Rates are assessed using a sliding scale and based on a percentage of program dues.

Funds are donated through the annual support campaign. The ability of the YMCA to grant MFA+ assistance is therefore dependent on the availability of those funds.

All information obtained in this application will remain confidential and will be accessible only to the designated staff person in charge of the financial aid procedure.

MFA+ assistance is awarded for a **per program** period. The recipient is responsible for reapplying for extensions of assistance in all areas. Recipients have the same access to the YMCA facilities and programs as members or participants paying full dues.

The MFA assistance structure will be available upon request. The guideline will be used by a trained YMCA professional staff member or their designee. Staff will have the discretion to take into account additional factors such as family illness, care of aging parents, single parent families, etc.... Changes in family size or income must be reported; not doing so or reporting false information could result in the cancellation of financial assistance. Co-payments may be adjusted when there is a rate increase in YMCA dues. In such cases, recipients will be informed 20 days prior to such adjustments.

NAME: _____ BIRTHDATE: _____

ADDRESS: _____ ZIP CODE: _____

HOME #: _____ BUSINESS #: _____

PLACE OF EMPLOYMENT: _____ POSITION: _____

E-MAIL _____

SPOUSE NAME: _____ BIRTHDATE: _____

PLACE OF EMPLOYMENT: _____ POSITION: _____

BUSINESS #: _____ E-MAIL _____

Have you applied for program assistance previously? YES NO

If yes, which branch(es)?	Downtown	Hutcherson	South Neighborhood	Owasso
	Thornton	Westside	Camp Takatoka	Dickenson

Please list all children living in the household:

NAME	AGE	NAME	AGE
1.		5.	
2.		6.	
3.		7.	
4.		8.	

Monthly Income:

TYPE	MONTHLY AMOUNT	TYPE	MONTHLY AMOUNT
Wages / Salaries	\$	Child Support / Alimony	\$
Social Security	\$	Pension / Retirement	\$
Food Stamps	\$	College Loans	\$
Unemployment	\$	Other	\$
TOTAL AMOUNT OF MONTHLY INCOME			\$

Any unusual circumstances (please explain):

Please fill the following chart out completely. Put check marks next to all Memberships and Programs you wish to apply for and the amount you feel you can pay in the next column:

Check to apply for Programs & Memberships below	Amount you are able to pay
Youth Sports	\$ / session
Swimming Lessons	\$ / session
Adult Sports	\$ / session
Day Camp	\$ / week
Child Care	\$ / week
Camp Takatoka	\$ / week
Membership Type	\$ / month
Other (please list)	

IMPORTANT!! With this application, please include the following pieces of documentation and registration fees. This application WILL NOT be processed without all of the required documentation.

1. Copies of your most recent 1040 tax form (preferably the last calendar year).
2. Proof of any public assistance you/family members are receiving (i.e.: Medicaid, SSI, Food Stamps).
3. Registration form and any applicable fees for the program for which applying (i.e. Membership, Sports, Day Camp, Child Care per applicant)
4. Any special documentation required by the YMCA Branch.

I certify that the above stated information is true and complete to the best of my knowledge. I am not classified as a dependent on my parent's income tax return (if so, they will have to apply for Membership For All Plus). I agree to inform the YMCA immediately of any changes in my income or family size. I understand that false information could jeopardize approval. I have read, understand, and agree to all the above information. I also have completed the attached form in full and have supplied the proper documentation and forms.

Name: (Please Print) _____

Signature: _____ Date: _____

