

YMCA BEAUFORT COUNTY FINANCIAL ASSISTANCE APPLICATION

APPLICANT INFORMATION

Name _____

Address _____

City _____ State _____

Zip _____

Phone _____

Email _____

New Applicant

Renewal (you have received assistance in past)

ALL PERSONS LIVING IN HOUSEHOLD

Place a for each member applying for assistance:

Parent/Guardian/Adult _____ **DOB** _____

Parent/Guardian/Adult _____ **DOB** _____

Child _____ **DOB** _____

Child _____ **DOB** _____

Child _____ **DOB** _____

Child _____ **DOB** _____

Child _____ **DOB** _____

Other _____ **DOB** _____

I AM APPLYING FOR (circle)

YOUTH (Age 12 & under)

TEEN (Ages 13-18)

COLLEGE (FULL TIME)

ADULT

JUNIOR FAMILY (NO CHILDREN)

FAMILY

SINGLE PARENT FAMILY

SENIOR FAMILY (NO CHILDREN)

SENIOR ADULT (AGE 62+)

AFTERSCHOOL PROGRAM

PRE SCHOOL

SUMMER CAMP

YOUTH SPORTS

ADULT SPORTS

SWIM LESSONS

SWIM TEAM

membership

program

TO BE CONSIDERED, PLEASE PROVIDE:

- 1040 Federal Tax Forms for all incomes in household (\$ _____ last year annual)
- Three current, most recent pay stubs for ALL working adults in household (\$ _____ / Monthly Income)
- Food stamp statement (\$ _____ /MONTH)
- Social Security Statement (\$ _____ /MONTH)
- Disability Statement (\$ _____ /MONTH)
- Child Support order (\$ _____ /MONTH)
- Unemployment Statement (\$ _____ /MONTH)
- Workers Comp. Statement (\$ _____ /MONTH)
- School schedule for any college student on membership

IF YOU DID NOT FILE FOR TAXES LAST YEAR:

- Call the IRS at 1-800-829-1040 (automated system will prompt you to enter appropriate information. Choose "personal tax account" when given options. Once the process is complete, the IRS will mail a letter to your home. You should receive it within 10-15 days.

Today's Date _____

Received by _____

The mission of the YMCA of Beaufort County YMCA is to put Christian principles into practice through programs that build a healthy spirit, mind and body for all.

For All Renewal Applications:

In addition to the above information that must be attached to this application, you must also provide us with a short paragraph of how the Financial Assistance Program/YMCA has impacted you or your family.