

MONTHLY INCOME WORKSHEET

(Please complete all sections and print clearly)

Income: Monthly

\$ _____ Your Gross Income
\$ _____ Spouse's Gross Income
\$ _____ Child Support
\$ _____ Other Income
\$ _____ Total Gross Income

How much can you afford to pay a month: _____

The YMCA of Greater Birmingham commits to maintaining confidentiality for those who have applied for, and/or received support from our scholarship program.

For Office Use Only;

Branch: _____ Approval Level/Percentage _____

Membership Type: _____ Activation Fee: \$25 Monthly dues: \$ _____

Program: _____ Registration Fee \$ _____ Weekly/Monthly/fee: _____

Branch Executive Director Approval _____



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



HERE TO HELP

Financial Assistance
Application YMCA of Greater Birmingham

YMCA of Greater Birmingham Locations

Alabaster

117 Plaza Circle
Alabaster AL, 35007
205 663 7240

YMCA Camp Cosby

2290 Paul Bryant Road
Alpine AL, 35014
800 852 6729

Downtown

2101 Fourth Avenue North
Birmingham AL, 35203
205 324 4563

Greystone

5414 Highway 280
Birmingham AL, 35242
205 981 0144

Hoover

2250 John Hawkins
Parkway Hoover AL, 35244
205 682 1399

Mountain Brook

2401 20th Place So.
Birmingham AL 35223 205
870 0144

Northeast Youth Center

Red Lane Road
Birmingham AL, 35215 205
833 7616

Pelham

2610 Pelham Parkway
Pelham AL, 35124
205 664 9622

Shades Valley

3551 Montgomery Highway
Birmingham AL, 35209
205 870 9622

Trussville

5920 Valley Rd.
Trussville AL, 35173
205 655 2224

YMCA Youth Center 2400

Seventh Avenue North
Birmingham AL, 35203 205
324 1643

YMCA of Greater Birmingham
ymcabham.org

The YMCA of Greater Birmingham is a charitable organization dedicated to making our community a healthier place.

Across Jefferson and Shelby Counties, 11 Ys engage more than 60,000 men, women, and children – regardless of age, income or background – to nurture the potential of children and teens, improve the nation's health and well-being, and provide opportunities to give back and support neighbors.

This is made possible through the generosity of Birmingham YMCA donors and volunteers. Our goal is to turn no one away due to inability to pay.

Thank you for considering the YMCA of Greater Birmingham to serve you and your family.

Scholarships are awarded based on household income, number of household members, and the availability of YMCA funds raised in our Annual Campaign.

REMEMBER THESE ITEMS

- Required documents must accompany your application.
- Membership scholarship awards will be valid for the length of your active YMCA membership and will receive a review every 2 years. If the membership cancels, a new scholarship application will need to be completed to rejoin under our assistance program.
- Program scholarships are awarded separately and are valid for the program applied for. (Scholarships do not apply to all programs)
- Awards reduce fees, all recipients pay a portion of the fees.
- Approved applications must be acted on within 30 days of approval.

PERSONAL INFORMATION

(Please complete all sections and print clearly)

Required Documentation Incomplete applications can not be processed.

- W-2 form for preceding year or proof of no income
- Income tax form for the preceding calendar year
- Two of your most recent pay stubs from your employer
- Additional documentation such as: SSI, alimony, child support, disability, etc.
- Additional information regarding other circumstances impacting your application.

In order to process your application, the following information is required for you and any adult(s) residing in the household. Items from A and B, and C if applies.

COLUMN A	COLUMN B	COLUMN C
Prior year's tax form (IRS Form 1040) with copies of all supporting W-2 forms (If self-prepared an IRS tax transcript is required)	Two – Most recent pay stubs (If you have not received at least two pay stubs, a letter from your employer verifying your hourly wages/salary is required)	If applicable Child Support and/or Alimony Verification Verification of any other circumstances you feel would further qualify you for a YMCA scholarship
Verification of Non-filing Letter 1-800-829-1040	If you're unemployed Proof of unemployment benefits Disability and/or Social Security Retirement Letter (s), if applicable verification of benefits for the entire family Worker's Compensation State and/or Federal Benefits A copy of your Award letter, if you are receiving TANF (Temporary Assistance for Needy Families), Food Stamps, WIC (Women, Infant, & Child), Medicaid or Medicare,	

Scholarship Statement

Please tell us why a YMCA Membership/Program Scholarship is important to you and your family?

PERSONAL INFORMATION

(Please complete all sections and print clearly)

Name _____ **DOB** _____ **Gender** M F

Address _____ **City** _____ **State** ____ **Zip** _____

Phone Home _____ Cell/work _____

Email _____ @ _____ . _____

Marital Status Single Married Divorced Widowed

Employer _____ **#Years** ____ **Position** _____

Address _____ **City** _____ **State** ____ **Zip** _____

Phone _____ **E-mail** _____

Are you currently enrolled in school? Yes No

(IF YES) Fulltime Part-time

Do you receive financial aid? Yes No

Spouse's Name _____ **DOB** _____

Employer _____ **#Years** ____ **Position** _____

Address _____ **City** _____ **State** ____ **Zip** _____

Phone _____ **E-mail** _____

Number of Dependents _____ **Total # in Household** _____

Name _____ **Age** _____ **Gender** _____ **School** _____

Scholarship Applied for:

Membership Family Adult Young Adult Sr. Adult Sr. Couple

Program Type _____

Signature _____

Today's Date _____