## INCOME / EXPENSE WORKSHEET

### INCOME:

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td>Your Gross Monthly Income</td>
<td>$</td>
</tr>
<tr>
<td>2)</td>
<td>Spouse's Gross Monthly Income</td>
<td>$</td>
</tr>
<tr>
<td>3)</td>
<td>Child Support</td>
<td>$</td>
</tr>
<tr>
<td>4)</td>
<td>Aid to Dependent Children</td>
<td>$</td>
</tr>
<tr>
<td>5)</td>
<td>Welfare (Submit Card)</td>
<td>$</td>
</tr>
<tr>
<td>6)</td>
<td>Food Stamps</td>
<td>$</td>
</tr>
<tr>
<td>☐ yes</td>
<td>☐ no</td>
<td></td>
</tr>
<tr>
<td>7)</td>
<td>Reduced Lunch Program (Submit Card)</td>
<td>$</td>
</tr>
<tr>
<td>8)</td>
<td>Other (Please Explain)</td>
<td>$</td>
</tr>
</tbody>
</table>

### EXPENSES:

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td>☐ Rent</td>
<td>$</td>
</tr>
<tr>
<td>2)</td>
<td>Mortgage</td>
<td>$</td>
</tr>
<tr>
<td>3)</td>
<td>☐ Auto Loan</td>
<td>$</td>
</tr>
<tr>
<td>4)</td>
<td>☐ Utilities</td>
<td>$</td>
</tr>
<tr>
<td>5)</td>
<td>Child Support</td>
<td>$</td>
</tr>
<tr>
<td>6)</td>
<td>☐ Medical</td>
<td>$</td>
</tr>
<tr>
<td>7)</td>
<td>Child Care</td>
<td>$</td>
</tr>
<tr>
<td>8)</td>
<td>Other (Please Explain)</td>
<td>$</td>
</tr>
</tbody>
</table>

**Total Monthly Income (Household)** $________
**Total Yearly Income (Household)** $________

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### Financial Assistance Program

**Do you share expenses with anyone else in your household?** ☐ yes ☐ no

**What is the total number of persons in your household?** __________

**How much can you afford to pay?** ____________________________________________

**What is your reason for applying for Financial Assistance?** ____________________________________________

**What benefits do you see in participating in the YMCA?** ____________________________________________

**I verify that all the information submitted is correct, complete and accurate. If my situation changes, I agree to notify the YMCA within 30 days. If I submit false or inaccurate information, or fail to notify the YMCA of changes within 30 days, I may be terminated from this program.**

**Signature of Applicant** ____________________________________________

**Date** ____________________________________________

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**Revised 12/2013**
The YMCA of Greater Dayton is a not-for-profit health and human services organization committed to helping people grow in spirit, mind, and body. The YMCA is here to serve people of all ages, backgrounds, abilities and incomes. It is community-based and believes that its programs and services should be available to everyone. That’s why the YMCA offers a Financial Assistance Program—a sliding fee scale designed to fit the YMCA of Greater Dayton spirit, mind, and body. The YMCA is here to serve people of all ages, backgrounds, abilities and incomes. It is community-based and believes that its programs and services should be available to everyone. That’s why the YMCA offers a Financial Assistance Program—a sliding fee scale designed to fit the YMCA of Greater Dayton spirit, mind, and body.

The YMCA of Greater Dayton requires that individuals provide the requested information on the attached form regarding income, family size, and necessary expenses—so that the YMCA can provide financial assistance in a fair and consistent manner.

All granted assistance requests will be for 6 months to 1 year. The YMCA requires that individuals reapply after this time period or whenever requested, to keep the information on file updated. All bank draft participants will be charged the full membership fee if they fail to reapply or terminate their membership before the review. Fees are subject to increase. If you do not reapply when requested your enrollment may be terminated.

The review process for granting Financial Assistance will be handled on a YMCA location by location basis. At the time you submit your completed application, please also submit your completed Membership Application or Program Registration form.

To process your application, we will need the following documentation:

• Copy of last year’s tax return
• Copy of last two pay stubs; or
• Copy of Social Security or Disability checks—or copy of bank statement showing amount of automatic monthly deposit

Notes:
- If you do not have a copy of your tax return, you may obtain one by calling the Internal Revenue Service (1-800-829-1040).
- All applications for financial assistance are kept confidential.
- All YMCA members receive the same membership benefits, regardless of whether or not they are receiving assistance. YMCA members can feel confident knowing that they are involved in an organization that cares greatly for the health and well-being of all people and is committed to youth development, healthy living and social responsibility.

FINANCIAL ASSISTANCE APPLICATION

Applications will be processed only after all information is submitted and application is filled out completely. Termination of program also terminates scholarship and will require that you reapply for assistance.

Name ____________________________ Home Phone ____________________________
Address ____________________________________________ Apt # ________________
City ____________________________ State __________ Zip ________________
Are you a full time student? □ yes □ no If yes, where? __________________________
Are you married? □ yes □ no Total number of dependents __________________________ Is spouse a full time student? □ yes □ no
Have you ever applied for Financial Assistance at any other YMCA location? □ yes □ no If yes, where? __________________________
List names (last names too, if different from applicant) and ages of all persons in the household. Your household includes all the dependents you claim on your federal income tax return.

1) ____________________________________________________________  Age __________
2) ____________________________________________________________  Age __________
3) ____________________________________________________________  Age __________
4) ____________________________________________________________  Age __________

EMPLOYMENT INFORMATION

Employer ____________________________________________ Work Phone ____________________________
Address ____________________________________________ City ____________________________ State __________ Zip ________________
Position ____________________________________________ Length of Employment ____________________________ □ Part-time □ Full-time
Gross Monthly Income ____________________________ Supervisor’s Name ____________________________
Spouse’s Employer ____________________________________________ Work Phone ____________________________
Address ____________________________________________ City ____________________________ State __________ Zip ________________
Position ____________________________________________ Length of Employment ____________________________ □ Part-time □ Full-time
Gross Monthly Income ____________________________ Supervisor’s Name ____________________________

Please complete the back of this form.

FOR OFFICE USE ONLY

□ New Applicant □ Renewal □ Current Member □ Tax Form Attached □ Approved
□ Adult □ Family □ Youth □ Payroll Stubs (2) □ Denied
□ Program □ Other Income Verification

COFFMAN YMCA
(937) 886-9622
Springboro • 88 Remick Blvd.

DOWNTOWN YMCA
(937) 228-9622
Dayton • 316 N. Wilkinson St.

FAIRBORN YMCA
(937) 754-9622
Fairborn • 300 S. Central Ave.

XENIA YMCA
(937) 376-9622
Xenia • 135 East Church St.

PREBLE COUNTY YMCA
(937) 472-2010
Eaton • 450A Washington Jackson Rd.

NDC TROTWOOD YMCA
(937) 854-9622
Trotwood • 506 East Main St.

KLEPTZ YMCA
(937) 836-9622
Englewood • 1200 W. National Rd.

SOUTH YMCA
(937) 415-1964
Kettering • 4545 Marshall Rd.

WEST CARROLLTON YMCA
(937) 866-9622
West Carrollton • 900 S. Alex Rd.

YMCA OF GREATER DAYTON LOCATIONS

WEST CARROLLTON YMCA
(937) 866-9622
West Carrollton • 900 S. Alex Rd.

SOUTH YMCA
(937) 415-1964
Kettering • 4545 Marshall Rd.

YMCA CAMP KERN
(513) 932-3756
Oregonia • 5291 State Route 350

PREBLE COUNTY YMCA
(937) 472-2010
Eaton • 450A Washington Jackson Rd.

COFFMAN YMCA
(937) 886-9622
Springboro • 88 Remick Blvd.

KLEPTZ YMCA
(937) 836-9622
Englewood • 1200 W. National Rd.

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XENIA YMCA
(937) 376-9622
Xenia • 135 East Church St.

FAIRBORN YMCA
(937) 754-9622
Fairborn • 300 S. Central Ave.

Y AT THE HEIGHTS
(937) 236-9622
Huber Heights • 7251 Shull Rd.

SOUTH YMCA
(937) 415-1964
Kettering • 4545 Marshall Rd.