

# **WELCOME TO ALL**

## **Financial Assistance Program Application**

### THE ESSENCE OF THE Y

Welcome to the Downtown Oakland YMCA. The Y is committed to ensuring that everyone has the opportunity to learn, grow, and thrive. To help, the Downtown Oakland YMCA provides financial assistance for those who may not be able to afford the full cost of programs and services. By offering a financial assistance program, Y programs can be accessible to individuals and families at all income levels without maintaining a fee structure that is artificially low or that compromises program quality.

#### **EVERYONE IS WELCOME**

The Downtown Oakland YMCA welcomes all who wish to participate. Through our Financial Assistance Program, we provide assistance to youth, adults and families based on individual needs and circumstances. All this is made possible through the hard work and generosity of our volunteer fundraisers and donors.

### **COMMITTED TO OUR COMMUNITY**

Determining assistance amounts is handled by the Downtown Oakland YMCA through an application process. Every Y member receives the same membership benefits, regardless of whether or not they receive assistance. Downtown Oakland YMCA members can feel confident knowing that they are a part of an organization that cares greatly for the well-being of all people, and is committed to youth development, healthy living and social responsibility.

Our Financial Assistance Program **reduces dues;** it does not eliminate them.

Membership dues are subject to change when you reapply.

If you do not reapply at the time requested, **your membership will continue without financial assistance** and regular membership rates will be charged.

This application is for **membership to the Downtown Oakland YMCA** and does not apply to Bay Area memberships or other YMCA Associations.

Please contact our front desk for information about financial assistance for other Y programs at 510 451 9622.





### Financial Assistance Payment Options

If you are approved for the Financial Assistance Program at the Downtown Oakland YMCA, you may pay for your membership in one of four ways:

- 1. 3 months at a time
- 2. 6 months at a time
- 3. 1 year at a time or
- 4. Monthly draft

Monthly membership dues are electronically drafted to a checking account, savings account or a credit card. We accept MasterCard, Visa, Discover or American Express. Sorry, we do not take debit or pre-paid credit cards for payment plans. To use a checking or savings account, please present a voided check or bank document with printed routing and account numbers, and the name and address of the account holder. Quarterly, semi-annual and annual memberships can be paid by cash, check, credit or debit card.

If you'd like to pay for your membership dues by monthly draft and you do not have a bank account please consider applying for an account with our partner One PacificCoast Bank, FSB a Community Development Financial Institution in Downtown Oakland.

For more information about opening a new account please contact:

#### One PacificCoast Bank

New Accounts Representative 1438 Webster Street Oakland, CA 94612 510 550 8400 | opcb.com

#### What kind of documents do I need to provide for Financial Assistance?

These are the 4 acceptable options for income verification. (Additional proof of dependency is required for minors under 18.)

### 1. A copy of your current federal tax return (1040, 1040A, or 1040EZ):

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A copy of your current federal tax return, signed and dated with Adjusted Gross Income (1040 line 37, 1040A line 21, or 1040EZ line 4).

#### If you do not file taxes, choose one of these other options:

- **2. Pay Stubs:** One month's worth of pay stubs from all current employers, or a letter(s) on company letterhead stating your gross monthly income (gross income is your income before taxes and benefits are taken out).
- **3. Government Assistance Letter:** A recent SSI or other government assistance disbursement voucher or award letter showing how much monthly income you receive.
- **4. Full-Time Student:** If you are a student, proof of current full-time enrollment and additional proof of income.

#### WHAT TO EXPECT NEXT:

- Please allow approximately two weeks for processing.
- You will receive a letter of approval or denial mailed to the address listed on your application.
- If you receive an approval notice, please bring the approval sheet, application, and all documents originally submitted in to the Downtown Oakland YMCA to start or continue your Financial Assistance membership.
- If you receive a denial notice, please read all instructions carefully and resubmit your application with the missing information.





# **Financial Assistance Application**

Please complete the entire form, sign, date it, and submit to the Downtown Oakland YMCA. **All information is confidential.** Completion of this application does not guarantee approval. Please allow approximately two weeks for processing.

Even if you're only applying for one membership, PLEASE INCLUDE ALL PERSONS LIVING IN YOUR HOUSEHOLD.

Assistance is awarded based on household size. Please check  $\mathbf{v}$  if the person is applying for membership.

F	PRIMARY ADULT - PLEASE PRINT LEGIBLY				
_	First Name	Do you receive income?  Yes			
			Yes D No		
	Date of Birth		Gender		
	Address Street City	State		······································	
		( )			
	Email Cell Phone	Home Pho	one		
	SECONDARY ADULT				
	First Name	Last Name		Do you receive income?  Yes	
	Date of Birth	Condor			
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F	AMILY MEMBERS				
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	IF YOU ARE APPLYING FOR MEMBERSHIP FO	K JOMEONE	at can be used are: return (1040 - 1040	A, or 1040EZ) listing dependents	
	UNDER THE AGE OF 18, one adult must be inclu application and a proof of dependency document i			t lists your child(ren)'s name	
	A birth certificate is not proof of dependency.  • An official letter with your child(ren)'s name(s) and the add				
		that is listed	l on your financial a	iid application	
	FAMILY AND MEMBERSHIP INFORMATION	N			
Are	you or any members of your family currently mem	pers of this YMCA? If yes, wh	hat kind of membe	er?	
	Yes □ No		y 🖵 Program (1		
F	OR STAFF USE ONLY				
 S	taff Member Received	Date			

#### MONTHLY HOUSEHOLD INCOME Combined income from all adults in household

What kind of documents do I need to provide for Financial Assistance? These are the 4 acceptable options for income verification.

1. A copy of your current federal tax return (1040, 1040A, or 1040EZ):

A copy of your current federal tax return, signed and dated with Adjusted Gross Income (1040 line 37, 1040A line 21, or 1040EZ line 4).

1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

If you do not file taxes, choose one of these other options:

- **2. Pay Stubs:** One month's worth of pay stubs from all current employers, or a letter(s) on company letterhead stating your gross monthly income (gross income is your income before taxes and benefits are taken out).
- **3. Government Assistance Letter:** A recent SSI or other government assistance disbursement voucher or award letter showing how much monthly income you receive.
- **4. Full-Time Student:** If you are a student, proof of current full-time enrollment and additional proof of income.

If none of these apply for you, please speak to a Manager-on-Duty.

PLEASE ATTACH PHOTOCOPIES OF APPROPRIATE QUALIFYING DOCUMENTS ALONG WITH THIS APPLICATION.

#### **MEMBERS UNDER THE AGE OF 18**

Paying Adult\* Signature

IF YOU ARE APPLYING FOR MEMBERSHIP FOR SOMEONE UNDER THE AGE OF 18, one adult must be included on this application and a proof of dependency document is required. A birth certificate is not proof of dependency.

Documents that can be used are:

- Current tax return (1040, 1040A, or 1040EZ) listing dependents
- A copy of rental agreement that lists your child(ren)'s name

Date

An official letter with your child(ren)'s name(s) and the address

certificate is in	or brook or debe	ildelicy.	, o
PERSONAL	L STATEMEN	Γ Are there any	other factors we should take into consideration?
FINANCIAI	L ASSISTANC	E EXPIRATION	
1st Adult		Paying Adult*	I understand that, if approved, my Financial Assistance expires no more than 1 year after sign-up. If I pay for my membership with automatic monthly payments and my assistance expires, I understand that regular membership rates will automatically be withdrawn from my account.
Initials	Initials	Initials	I understand that it is my responsibility to re-apply before the deadline given.
AUTHENT	ICATION STA	TEMENT	
documentation awards. I unde	n to verify need erstand I am sul	, if requested. I ar	of the information on this form is accurate and complete. I agree to provide additional m aware that on-time program payments are required to receive financial assistance and regulations of the YMCA. Supporting documents will not be returned. Each application re are changes in your income, please notify the YMCA.
X			
Primary Adult S	ignature		Date
X			
Secondary Adu	lt Signature		Date
X			

Your signature indicates that you understand the policies and procedures of the Downtown Oakland YMCA Financial Assistance program. \*If someone who is not on the membership is paying for this membership.

YMCA financial assistance is made available through donations, grants, and association earned income.