



# YMCA of the Palouse Financial Assistance Application

OFFICE USE ONLY:  
RECEIVED BY: \_\_\_\_\_ Application Complete On: \_\_\_/\_\_\_/\_\_\_

**PARTICIPANT NAME:** \_\_\_\_\_ **APPLICANT NAME:** \_\_\_\_\_  
**MAILING ADDRESS:** \_\_\_\_\_ **CITY/STATE/ZIP:** \_\_\_\_\_  
**CELL PHONE:** (\_\_\_\_)\_\_\_\_-\_\_\_\_ **HOME PHONE:** (\_\_\_\_)\_\_\_\_-\_\_\_\_ **EMAIL:** \_\_\_\_\_  
**PROGRAM:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_ **ENROLLMENT STATUS:** \_\_\_\_\_  
 HAVE YOU PREVIOUSLY APPLIED FOR FINANCIAL ASSISTANCE FROM THE YMCA OF THE PALOUSE?  YES  NO  
 IF YES, WHEN?

**MONTHLY INCOME & EXPENSES**  
LIST MONTHLY INCOME FROM ALL SOURCES:

| MONTHLY INCOME                       |  | MONTHLY EXPENSES        |  |
|--------------------------------------|--|-------------------------|--|
| Your gross income                    |  | Rent/Mortgage           |  |
| 2 <sup>nd</sup> Adult's gross income |  | Utilities               |  |
| Child Support Received               |  | Telephone               |  |
| Aid to Dependents                    |  | Vehicle Payment         |  |
| Welfare                              |  | Vehicle Insurance       |  |
| Alimony Receiving                    |  | Medical/Dental Expenses |  |
| Food Stamps                          |  | Tuition/College Loans   |  |
| Social Security                      |  | Alimony Paying          |  |
| Social Security Disability           |  | Child Support Payment   |  |
| 401K/Retirement Funds                |  | Childcare               |  |
| Annuity/Investment Income            |  | Other                   |  |
| Other Income                         |  | Other                   |  |
| Total                                |  | Total                   |  |

**HOUSEHOLD MEMBERS:**  
 ADULT/PARENT/GUARDIAN \_\_\_\_\_  
 ADULT/PARENT/GUARDIAN \_\_\_\_\_  
 CHILD \_\_\_\_\_  
 CHILD \_\_\_\_\_  
 CHILD \_\_\_\_\_  
 CHILD \_\_\_\_\_  
 Who has custody of the child(ren)?  
 Do parents share child care costs?

**TO QUALIFY FOR FINANCIAL ASSISTANCE, PROVIDE THE FOLLOWING DOCUMENTS:**

|  |   |
|--|---|
| <b>I FILED FEDERAL TAXES LAST YEAR</b><br>↓  | <b>I DID NOT FILE FEDERAL TAXES FOR LAST YEAR</b><br>↓  |
| <ul style="list-style-type: none"> <li>◦ Last year's Federal Tax Forms for all incomes in the household</li> <li>◦ Last 2 pay stubs for all adults in the household</li> <li>◦ Current rental agreement or mortgage statement</li> </ul> | <ul style="list-style-type: none"> <li>◦ Checking and savings accounts for all adults in the household for the last 3 months</li> <li>◦ Current rental agreement or mortgage statement</li> </ul> |

**TELL US MORE...**  
 Please attach a signed letter to include more information or explain extenuating circumstances that were not included on this application.

How did you hear about the YMCA of the Palouse?

I certify that all information on this application is true and complete to the best of my knowledge. I hereby agree to notify the YMCA of the Palouse if there are any changes to my financial situation with 5 business days.

\_\_\_\_\_  
Signature Date