

Gateway Program

Financial Assistance Program

**YMCA of Greater Spartanburg Mission:
To put Christian principles into practice through programs
that build healthy spirit, mind, and body for all.**

The YMCA of Greater Spartanburg is a non-profit organization committed to helping all people grow in spirit, mind and body. We are here to serve people of all ages, backgrounds, abilities and incomes. The Y is community-based and believes that its programs and services should be available to everyone, which is why the YMCA of Greater Spartanburg offers the Gateway Program. This program is financially supported by people in our community that donate money each year to our annual support campaign called "**Partners With Youth.**" 100% of the money raised from our campaign is used to fund this scholarship program. This program is to be utilized by:

- ✓ Youth referred by schools, churches and organizations
- ✓ Adults who are temporarily out of work
- ✓ Those who are divorced and are experiencing financial hardship
- ✓ People on fixed incomes
- ✓ People who are overwhelmed by medical bills
- ✓ Those experiencing other financial hardships

The YMCA of Greater Spartanburg requires that individuals provide the requested information on the attached form regarding income, family size and necessary expenses so that scholarships can be provided in a *fair* and *consistent* manner. Scholarship amount is determined by documentation of need and by guidelines set by the national YMCA's sliding fee scale that is designed to fit each individual's financial situation.

The Y believes a strong sense of ownership and pride is developed if the financial assistance recipient has contributed to the cost of their YMCA involvement. Therefore, applicants will be asked to pay a portion of the YMCA's joining fee, membership fees, and program fees as stated on their approval letter. All fees are kept confidential, as they are specific to individual circumstances.

The Y also requires that membership recipients re-apply after one year so that the information is current and participation in membership and programs can continue. Fees are subject to increase when you reapply. If you do not re-apply, your enrollment will be terminated.



YMCA of Greater Spartanburg

The Y: We're for youth development, healthy living and social responsibility.

Application Process

The Branch Executive and/or designated director at the branch is authorized to grant partial scholarships for reasons such as low income, medical expenses, unemployment, etc. Persons interested in applying for membership scholarships will be referred to the designated director.

For membership and program scholarships...

1. Submit your completed Gateway Application form (copy attached).
 - A. Completed application and documentation of household income. **The following documentation is REQUIRED to be submitted with your application:**
 - ✓ Last Year's Tax Return (if you did not file taxes last year, please make note of that on your application. Please submit a copy of your tax return, NOT your W-2's.)
 - ✓ 2 consecutive pay stubs for each wage earner or
 - ✓ Social Security and Disability Check or
 - ✓ Unemployment Payments and
 - ✓ Documentation of child support (if applicable)
 - ✓ Proof of layoff or termination
 - ✓ *Explanation of your need for assistance*

NOTE: If more than one adult resides in the household, documentation must be submitted for all adults.

- B. Documentation of extenuating circumstances to be considered (medical treatment, educational costs, unemployment, etc.)
2. The director will process your completed application and respond with a letter within 30 days.
3. After a scholarship has been awarded, the recipient will have 1 month to bring the acceptance letter and activate his/her membership. If 1 month passes without activation, the scholarship will be canceled and the award given to another qualifying recipient.
4. Once activated, the recipient will need to pay a portion of the Joining Fee and set up a monthly draft or pre-pay for the year.

*****Applications submitted without the proper documentation will not be processed. The Y reserves the right to refuse assistance to any applicant who cannot provide sufficient evidence of need. Scholarships will be awarded as funds are available. *****

All Y members receive the same membership benefits, regardless of whether or not they are receiving assistance. Y members can feel great knowing that they are involved in an organization that cares greatly for the health and well-being of people and is committed to *building strong kids, strong families, strong communities.*

Please call the Y if you have any questions in regards to the Gateway Program.

Middle Tyger YMCA
Jennifer Wilson or Cheryl Dherit
(864) 433-9623

Pine Street YMCA
Megan Whitson
(864) 585-0306

Gateway Financial Assistance Application

Primary Member (PLEASE PRINT)

First Name _____ MI _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____ Date of Birth _____

Employer _____ Email Address: _____

Length of Employment _____ Part Time _____ Full Time _____

2nd Adult in Household

Name _____ Date of Birth _____

Employer _____ Work Phone _____

Length of Employment _____ Part Time _____ Full Time _____

Members in Family/Household

Everyone in household listed MUST be claimed on your income taxes or have proof of residency or dependency

Name: _____ Sex: M F DOB: __/__/__ Relationship: _____

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Name: _____ Sex: M F DOB: __/__/__ Relationship: _____

Name: _____ Sex: M F DOB: __/__/__ Relationship: _____

Name: _____ Sex: M F DOB: __/__/__ Relationship: _____

Name: _____ Sex: M F DOB: __/__/__ Relationship: _____

Are you a current member? Yes ___ No ___ Is this a renewal application? Yes ___ No ___

Desired Branch for Membership (check one): Pine Street YMCA ___ Middle Tyger YMCA ___

Please circle the membership type for which you are applying from the following:

Youth/Student Adult Senior Household Senior Household

Please circle any programs for which you are applying:

Swimming Lessons Youth Sports Summer Day Camp After-School Program

*****To expedite your application, please be sure to include documentation of all income. Applications submitted without documentation for income and expenses will not be processed.*****
Household income: This includes any income of those applying for assistance. Verification of all income and expenses must be attached to the application before it can be processed.

Your Gross Monthly Income	\$ _____
2 nd Adult Gross Monthly Income	\$ _____
3 rd Adult Gross Monthly Income	\$ _____
Social Security	\$ _____
Disability	\$ _____
Unemployment Compensation	\$ _____
Child Support	\$ _____
Aid to Dependent Children	\$ _____
Welfare (submit copy)	\$ _____
Food Stamps	\$ _____
Other (Savings, Grants, 4 th Adult, etc)	\$ _____
Reduced Lunch Program	Yes _____ No _____

Total Monthly Income \$ _____ Annual Gross Household Income \$ _____

Please explain your need for financial assistance, including any unexpected expenses. _____

What dollar amount do you feel you can afford to pay? _____

Do you share expenses with anyone else in your household? Yes _____ No _____

Would you be interested in volunteering at the YMCA? Yes _____ No _____

I understand that my membership rate is based on my household income information and that I must reapply for the Gateway program by my anniversary date. I agree that if I do not submit the proper documentation by my anniversary date, you may cancel my membership. I understand that my rate may change when I reapply as my financial circumstances change and as funds are available.

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

Signature of Applicant

Date