



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA OF GREATER HARTFORD FINANCIAL ASSISTANCE APPLICATION

HOW TO APPLY AND WHAT TO EXPECT

In order to apply for Financial Assistance, you must supply the YMCA with the following documents. Complete the YMCA Financial Assistance Check List for the program area needed:

Camp and Childcare Financial Assistance Checklist

- Financial Assistance Application
- 2020 1040 Tax Returns
- Two Most Current Paystubs for each income-earning member of the household
- Proof of any Other Income (i.e. child support, social security benefits, etc.)
- Care4Kids Application
- Care4Kids Parent Agreement Form

Families applying for Camp or Childcare Financial Assistance are required to apply for Care4Kids. Go to www.ctcare4kids.com—print and complete the Care4Kids application and the Provider Agreement forms located on their website.

Membership and Program Financial Assistance Checklist

- Financial Assistance Application
- 2020 1040 Tax Returns
- Two Most Current Paystubs for each income-earning member of the household
- Proof of any Other Income (i.e. child support, social security benefits, etc.)

Please note if you are unable to supply a tax return we must receive proof of non-filing status. You may call the IRS at 1-800-829-1040 to request this.

All applications must be 100% complete, with all applicable attachments or your application will be denied and returned.

Approval and Payment Process

You will receive an approval or denial letter within 14 days of receipt of application. You must return the signed copy of the letter by the date indicated in order to receive the financial assistance. If the letter is not returned, your financial assistance will be cancelled.

If you decline the scholarship and wish to cancel the enrollment in our program, please contact the YMCA **in writing** via email or mail the letter to the YMCA branch.

Camp Jewell YMCA

6 Prock Hill Road
Colebrook, CT 06021
860-379-2782
Camp.Jewell@GHYMCA.org

Camp Woodstock YMCA

42 Camp Road
Woodstock Valley, CT 06282
860-974-1336
CWregistrar@GHYMCA.org

East Hartford YMCA

770 Main Street
East Hartford, CT 06108
860-289-6612
EastHartford@GHYMCA.org

Downtown Hartford YMCA

90 State House Square
Hartford, CT 06103
860-522-4183
DowntownY@GHYMCA.org

Glastonbury YMCA

95 Oakwood Drive
Glastonbury, CT 06033
860-633-6548
Glastonbury@GHYMCA.org

Hale YMCA

9 Technology Park Drive
Putnam, CT 06260
860-315-9622
HaleY@GHYMCA.org

Farmington Valley YMCA/ Camp Chase

97 Salmon Brook Street
Granby, CT 06035
860-653-5524
FarmingtonValleyY@GHYMCA.org

Indian Valley YMCA

11 Pinney Street
Ellington, CT 06029
860-871-0008
IndianValleyY@GHYMCA.org

Tri-Town YMCA

Administrative Office
95 Oakwood Drive
Glastonbury, CT 06033
860-633-6548
TriTownY@GHYMCA.org

West Hartford YMCA

Administrative Office
149 Farmington Avenue
Plainville, CT 06062
860-793-9631
WestHartfordY@GHYMCA.org

Wheeler YMCA

149 Farmington Avenue
Plainville, CT 06062
860-793-9631
WheelerY@GHYMCA.org

Wilson-Gray YMCA

444 Albany Avenue
Hartford, CT 06120
860-241-9622
WilsonGrayY@GHYMCA.org



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YMCA OF GREATER HARTFORD FINANCIAL ASSISTANCE APPLICATION

First Name: _____ MI: _____ Last Name: _____

Address: _____

Town/City: _____ State: _____ Zip Code: _____

Email Address: _____ Preferred Phone: _____ Birth date: _____

Employer Name: _____

Employer Address: _____

Town/City: _____ State: _____ Zip Code: _____

Job Title: _____ Business Phone: _____

Spouse/Partner Name: _____ MI: _____ Last Name: _____

Employer Name: _____

Employer Address: _____

Town/City: _____ State: _____ Zip Code: _____

Job Title: _____ Business Phone: _____

Number of Dependent Children: _____

Name: _____ Birth date: _____ Name: _____ Birth date _____

Name: _____ Birth date: _____ Name: _____ Birth date _____

Name: _____ Birth date: _____ Name: _____ Birth date _____

Financial Assistance is Requested For:

Membership Programs Child Care Camp Other

Other Information

Your Gross Annual Salary: \$ _____ Spouse/Partner's Gross Annual Salary: \$ _____

Other Income (list source & amount): _____

Housing: Own Rent Monthly Mortgage/Rent: _____

Do you receive a housing subsidy? Yes No Amount per Month: \$ _____

Please list any special circumstances that affect your reason for need: _____

To qualify for financial assistance, you must submit the following documents within 2 weeks of application:

- Your most recently filed tax return
- Two current paycheck stubs or other proof of your current combined total income
- Proof of any other income - i.e. child support, social security benefits, etc.

The information listed on this form is correct to the best of my knowledge. I understand that if I do not provide the required documentation within 2 weeks, my membership rate will revert to the full fee. I understand that I must re-apply for financial assistance every 12 months from the date of this application. If I do not re-apply for financial assistance, my fees will revert the full published rate.

Applicant Signature: _____ Date: _____

YMCA of Greater Hartford Staff to Complete this Section

Member Account Number _____	Branch _____
Percent of Subsidy _____	Begin Date _____ Review Date _____
Approved By _____	Date Entered _____