



YMCA of Kingston & Ulster County – 507 Broadway, Kingston, NY 12401

2018 – 2019 Afterschool Financial Assistance Application Form,

Registration and required documentation must be turned in by 7/15/2018

The YMCA is committed to serving families regardless of their economic status.

I'm interested in Financial Assistance with the following Afterschool Program: _____

Child's Name: _____ Parent/Guardian's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: (H) _____ (W) _____ (C) _____

E-Mail: _____

Do you receive a childcare subsidy from DSS? (circle one) YES NO

List all members of the household with ages: _____

Household Income: Total Annual Income - \$ _____

Please provide **two (2) current consecutive pay stubs** and **proof of all items indicated below** for all adult members of the household.

Please enter the annual amount:

Wage	\$ _____
Child Support	\$ _____
Alimony	\$ _____
Pension	\$ _____
Public Assistance	\$ _____
Rent Subsidy	\$ _____
Food Stamps	\$ _____
Worker's Comp	\$ _____
Disability	\$ _____
Other (describe below)	\$ _____
_____	_____

Special Financial Circumstances: Please use this area to tell us about any special financial circumstances such as loss of job, death of a spouse, medical illness, etc. that have had a negative impact on your financial situation. Use another sheet of paper if necessary.

I certify that the information provided here is accurate and complete to the best of my knowledge and that I have provided all available documentation as requested.

Signature of Parent/Guardian

Date

Office Use:
Date/Time Received: _____ Staff Initials: _____ Processed: _____
Annual Income: \$ _____ Household Members: _____ Award: _____