



# OPEN ARMS FINANCIAL ASSISTANCE PROGRAM

FUNDED BY THE SHARE THE SPIRIT CAMPAIGN

Get Started Today!  
Follow these 4 easy steps:

**STEP 1:**  
**COMPLETE THIS FORM:**

Date Application Submitted: \_\_\_\_\_

<input type="checkbox"/> New  <input type="checkbox"/> Renewal	<b>MEMBERSHIP:</b> <input type="checkbox"/> Youth/Teen (Under 19) <input type="checkbox"/> Adult (19-64) <input type="checkbox"/> Family <input type="checkbox"/> Single Parent Family <input type="checkbox"/> AOA—Active Older Adult (65+) <input type="checkbox"/> AOA Family
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**PERSONAL INFORMATION:**

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Home/Cell/Work Number: \_\_\_\_\_

Spouse: \_\_\_\_\_ Home/Cell/Work Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Children's Names:

1. \_\_\_\_\_ Age: \_\_\_\_ DOB: \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_
2. \_\_\_\_\_ Age: \_\_\_\_ DOB: \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_
3. \_\_\_\_\_ Age: \_\_\_\_ DOB: \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_
4. \_\_\_\_\_ Age: \_\_\_\_ DOB: \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_

**STEP 2:**

Check current household income:

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> \$0—\$9,999       | <input type="checkbox"/> \$10,000—\$13,999 | <input type="checkbox"/> \$14,000—\$16,999 | <input type="checkbox"/> \$17,000—\$19,999 |
| <input type="checkbox"/> \$20,000—\$24,999 | <input type="checkbox"/> \$25,000—\$29,999 | <input type="checkbox"/> \$30,000—\$34,999 | <input type="checkbox"/> \$35,000—\$39,999 |
| <input type="checkbox"/> \$40,000—\$44,999 | <input type="checkbox"/> \$45,000 +        |  |  |

Submit a copy of last year's tax return—form 1040 **AND** your current pay stub **AND** a copy of one of the following documents:

- Unemployment income verification letter
- Social Security or Disability check ward letters
- Class schedule if you are a full-time student

**ADMINISTRATION ONLY**

Membership	Date Begins/ Ends	Total Program Assistance	Joining Fee	Membership Fee	Amount Paid	Total Financial Assistance

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



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**STEP 3:**

Check the programs you are interested in receiving assistance

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Youth Sports     | <input type="checkbox"/> Pryme Tyme  |
| <input type="checkbox"/> Gymnastics       | <input type="checkbox"/> Summer Camp |
| <input type="checkbox"/> Swimming Lessons | <input type="checkbox"/> Dazzle Days |

**COMMENTS:**

Please feel free to include any comments about your application in the space below:

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**STEP 4:**

Upon notification of approval, please return to the YMCA to complete your membership/program registration.

**GIVING BACK TO THE YMCA**

In appreciation of the YMCA of Georgia’s Piedmont’s Open Arms Financial Assistance Program, you can volunteer your time and help us build strong kids, strong families and strong communities. Please let us know if you would like to assist your YMCA by volunteering your time.

**ADMINISTRATION ONLY—Programs**

Youth Sports	Gymnastics	Swimming Lessons	Pryme Tyme	Summer Camp	Dazzle Days	Total Financial Assistance—Programs