



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**

# HERE TO HELP

## Membership For All

The Y is a nonprofit association offering opportunities for personal growth and service to others. To support our assisted members, we ask people to complete a confidential application. The Y strives to serve all segments of the community. Within our available resources, every effort will be made to accommodate all who wish to participate in Y programs and services. No one will be denied access to any Y program or service solely on the inability to pay.

Every year, the Kettle Moraine YMCA raises funds through our Annual Campaign, which helps offset the cost of membership and programs for those who qualify for our Financial Assistance, **LIVESTRONG®** at the YMCA, Diabetes Prevention, and other programs that can increase the quality of life.

### **How is the financial assistance amount determined?**

We offer a sliding fee scale based on the annual gross household income and the number of dependents whether applying for single or family membership.

### **Is it possible to join the Y for free?**

The Y believes a strong sense of ownership and pride is developed if the assistance recipient has contributed to the cost of their Y involvement. Therefore, applicants will be asked to pay a portion of the fee.

### **Will I be treated differently? Will other members know that I am on financial assistance?**

Only you and the membership representative will have access to your application. We track assistance data, but only in terms of numbers and statistics, not names.

### **Can I do anything in return for this assistance?**

Yes you can! The Y is a volunteer based organization. Visit with Human Resources for more information on getting involved.

### **Is assistance available for all programs?**

Yes, assistance is available for both programs and membership. Some programs may have a max limit allowed for assistance.



**KETTLE MORaine YMCA | [www.kmymca.org](http://www.kmymca.org)**

#### **West Washington Branch**

1111 W. Washington St., West Bend, WI 53095  
262-334-3405

#### **Feith Family Ozaukee Branch**

465 Northwoods Rd., Port Washington, WI 53074  
262-268-9622

#### **River Shores Branch**

705 Village Green Way, West Bend, WI 53090  
262-247-1050

# MEMBERSHIP FOR ALL APPLICATION

Bring in your completed Membership For All application to our Welcome Desk, along with copies of the required supporting documents. One of our Membership Supervisors will contact you with a reduced membership price.

## Kettle Moraine YMCA Scholarship Scale

Annual Income		Monthly Income Maximum	% Discount Off of Membership Rate				
From	To		1	2	3	4	5*
-	\$16,000	\$1,333	90%	90%	90%	90%	90%
\$16,001	\$22,000	\$1,833	75%	85%	85%	90%	90%
\$22,001	\$28,000	\$2,333	50%	65%	75%	85%	90%
\$28,001	\$34,000	\$2,833	40%	50%	75%	85%	85%
\$34,001	\$40,000	\$3,333	15%	25%	30%	35%	60%
\$40,001	\$53,000	\$4,416	5%	15%	20%	25%	55%
\$53,001	\$67,000	\$5,583	0%	5%	15%	20%	50%

\*add 5% for each additional person after 5 with max discount at 90%

### GENERAL INFORMATION:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Primary Source Of Income \_\_\_\_\_ Occupation \_\_\_\_\_  
 Race/Ethnicity  American Indian or Alaska Native  Asian  Native Hawaiian or Other Pacific Islander  Black or African American  
 Hispanic/Latino of any race  White

### GROSS MONTHLY INCOME:

Monthly wages, salaries, tips, commissions \$ \_\_\_\_\_ Food Stamps \$ \_\_\_\_\_  
 Monthly Child Support/Maintenance \$ \_\_\_\_\_ Pension or Retirement Funds \$ \_\_\_\_\_  
 Unemployment Compensation \$ \_\_\_\_\_ Other \$ \_\_\_\_\_  
 Social Security Compensation \$ \_\_\_\_\_ Total Gross Monthly Income \$ \_\_\_\_\_

### MEMBERSHIP TYPES:

Total Number of Household Members \_\_\_\_\_

#### Membership Types:

- Youth: 18 and under (\$28)
- Senior Two Adult Household: 60+ (\$60)
- Young Adult: 19-25 (\$38)
- Two Adult Household (\$68)
- Individual: 26-59 (\$49)
- Two Adult Household w/Children (\$74)
- Senior Individual: 60+ (\$43)
- One Adult Household w/Children (\$61)

**Children:** Dependent(s) through the age of 25 living at the same address as the adult(s) listed on the household membership.

**Household:** All members of this membership category must live at the same address. Documentation may be requested.

### PAYMENT PLANS:

All membership fees are non-refundable and non-transferable.

- **Annual Memberships** - Paid and renewed annually by cash, check, VISA, Mastercard or Discover.
- **Continuous Memberships** - Paid through automatic bank or credit card drafts. Cancellations require a written notice in person of 10 days prior to draft date.
- **Six month membership** - Paid and renewed annually by cash, check, VISA, Mastercard or Discover.

### SUPPORTING DOCUMENTATION:

Please come with copies of the required supporting documents. All documents must be current. (Check all that apply.)

- Tax Returns** - Bring your income tax return for the most current filing year (IRS form 1040, 1040A, etc. - include pages 1 & 2). If you are self-employed or own a business, include Schedule C or Schedule K. If you did not file taxes last year, we need to receive from you the IRS Verification of NON-Filing Letter. This can be obtained by downloading the IRS 4506-T Form at [www.irs.gov](http://www.irs.gov). **(W-2 forms will not be accepted).**
- Paycheck Stubs** - Along with the tax return, bring the two most recent paycheck stubs from EACH employer for both the applicant and spouse. Stubs must show gross wages and may not be dated more than 30 days from application date.
- Child Support/Alimony** - Bring legal guardianship, foster care documents (include pages 1 and 2). Include proof of divorce decree, if no longer married, showing alimony and child support.
- Government/Food Stamps** - A current Social Security award benefit letter, SSI Disability letter, retirement, unemployment, or other government subsidy.

#### OFFICE USE ONLY

Date Received: \_\_\_\_\_  
 Date Called: \_\_\_\_\_  
 Membership Rate & Type: \_\_\_\_\_