NORTHFIELD AREA FAMILY YMCA
519 DIVISION STREET
NORTHFIELD, MN 55057
(507) 645-0088
WWW.NORTHFIELDYMCA.ORG

Application for Financial Aid

Welcome to the Northfield Area Family YMCA! Through the generosity of our donors, the YMCA is pleased to provide financial aid for income-qualified families and individuals. We don't turn anyone away due to an inability to pay. That's our policy to the best of our ability and as resources are available. If you want YMCA membership, programs and services and cannot afford them, please complete this application and return it to the YMCA at the address above.

All applications are held in strict confidence.

Name:		**Date:**	
Address:			
City, State, Zip:			
Phone:			
Spouse or Partner Name:			
Dependent Name:		**Age:**	
Dependent Name:		**Age:**	
Dependent Name:		**Age:**	
Dependent Name:		**Age:**	
Dependent Name:		**Age:**	
Dependent Name:		**Age:**	
Annual Household Gross Income:		**Year:**	
Income Verified By: (Circle One)	**Federal Tax Return (Please attach copy)**	**State Tax Return**	**Other**

Please use the space below to explain any extenuating circumstances

YMCA Use Only

☐ Interview Conducted? ☐ Income Verified?

Determination: ☐ Payment Plan Terms: _____
☐ Fee Reduction at _____%

Applied to: ☐ Membership Only ☐ Programs Only ☐ Membership AND Programs

Expiration Date: _____

YMCA Staff Member: _____ YMCA Director: _____