

Northfield Area Family YMCA
1501 Honeylocust Drive
Northfield, MN 55057
(507) 645-0088
WWW.NORTHFIELDYMCA.ORG



Scholarship Application Form

Welcome to the Northfield Area Family YMCA! Through the generosity of our donors, the Y is pleased to provide Scholarships for families and individuals. If you are interested in becoming a part of the YMCA and you are in need of any type of financial support, please complete this Scholarship packet and return it to the Member Services desk at the YMCA.

- **Please note:** There are many Scholarship Packets turned in every week. **Once your application is complete and submitted, it will take 10 to 14 business days to process.**
- **Scholarship packets must be fully complete before they can be processed.**
- Your Award Letter will be sent to you **via Email**, unless you request that it be mailed.

What type of financial scholarship/scholarships are you applying?

____ Family Membership ____ Adult Membership ____ Senior Membership
____ Youth Membership ____ Programs/Camp ____ Family Plus Membership

Full Name: _____ **Date of Birth:** _____ **M/F:** ____

Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Email Address (Required): _____

Phone Number: _____

Additional Family Members to be added to scholarship (MUST RESIDE IN YOUR HOME)

- **Name:** _____ **Date of Birth:** _____ **M/F:** ____
- **Name:** _____ **Date of Birth:** _____ **M/F:** ____
- **Name:** _____ **Date of Birth:** _____ **M/F:** ____
- **Name:** _____ **Date of Birth:** _____ **M/F:** ____
- **Name:** _____ **Date of Birth:** _____ **M/F:** ____

Please use the space below to explain your financial situation and extenuating circumstances (You may add additional pages if needed):

For YMCA Office Use Only

Annual Household Gross Income: _____ Income Verified: _____
Scholarship Plan: _____ Expiration Date: _____
Admin Approval Signature: _____ Date: _____
Coordinator Approval Signature: _____ Date: _____



Scholarship Packet Checklist: Is It Complete?

Please initial each line to verify that this item is included in your scholarship packet.

Note: We are unable to process incomplete packets.

If you have questions, please contact:

- Rachel Vantries: (507) 645-0088 / admin@northfieldymca.org

Required for Every Packet

- _____ **Scholarship Application Form**
 - Must be completely filled out for scholarship to be processed.
- _____ **Membership Registration Form**
 - **All** highlighted areas are filled in.
 - Form is **signed** and **dated** at the bottom.
- _____ **Proof of Income** for all Members listed on the Scholarship Application Form that are 18 and over.
 - Proof of Income includes the last 2 pay stubs from your current employer or a copy of your last year's tax returns.
 - If you are 18 and over and *unemployed* you may include: a Social Security Award Letter, proof of your last 2 months of County Assistance, or proof of your last 2 months of Unemployment Benefits.

Optional Items you may include with your Packet

- _____ **Proof of School Enrollment**
 - Needed for everyone 18 and over listed on the Scholarship Application Form that is currently unemployed.
- _____ **Referral Letter**
 - In some instances you will be given a referral letter for a Northfield Area Family YMCA Scholarship from your Health Care Professional or from specific Community Resource Organizations. Your referral letter can be submitted in place of Proof of Income.
 - Please note: Including your Proof of Income in addition to the Referral Letter may help your Scholarship award increase to a greater amount.
 - Including your Proof of Income in addition to a Referral Letter is not required, but is advised.

BECOME A MEMBER: JOIN TODAY!



OUR MISSION:

The Northfield Area Family YMCA builds strong kids, strong families and a strong community. We are a trusted partner and collaborator with many local organizations. We provide programs and services to enrich Northfield and surrounding communities to build a healthier, more active and engaged community. The Northfield Area Family YMCA will operate by the values it hopes to cultivate in the communities it serves: caring, honesty, respect and responsibility. These values will direct the governance of the organization, the creation and operation of its programs, and the conduct of its leaders, staff, volunteers, members and guests.

MEMBERSHIP REGISTRATION FORM

Full Legal Name (First, Middle, Last) _____

Preferred Name _____ Birthdate ____ / ____ / ____ Gender _____

Address _____ Apt # _____ City _____ State _____ Zip _____

Phone: home (____) _____ cell/other (____) _____ Email _____

Emergency Contact: Name _____ Relationship _____ Phone (____) _____

Household Information: Please list all other household members you would like active on this membership

full legal name	gender	birthdate(mm/dd/yy)	relationship	email address
		/ /		
		/ /		
		/ /		
		/ /		
		/ /		

PAYMENT INFORMATION

Please provide bank OR credit card information for monthly withdrawal

Bank Name _____ Bank Routing Number _____ Account Number _____

Credit Card Number _____ CC Exp Date ____ / ____ Cardholder Signature _____

Monthly Payment Date 1st 15th of the month

MEMBERSHIP FEES

Joiner's Fee (due upon joining or rejoining for all membership types)..... \$ 50 total

Youth Membership (ages 0-17).....\$32/month = \$ _____ total

Adult Membership (ages 18-61).....\$52/month = \$ _____ total

Senior Membership (age 62+).....\$42/month = \$ _____ total

Family Membership*.....\$82/month = \$ _____ total

*up to 2 adult members and all children up to age 17

Family Plus Membership*.....\$102/month = \$ _____ total

*up to 3 adult members and all children up to age 17

TOTAL DUE = \$ _____

Thanks to the generosity of our community and donors, the YMCA will not turn away anyone from its membership or programs because of an inability to pay. Please let us know if we may assist you in this way.

I understand that my membership will auto-renew each month unless I complete the cancellation form in advance.

The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access. PHOTO RELEASE: I hereby release all photos of me and my family members taken by the YMCA for promotional purposes, including the YMCA's website and printed materials. My signature indicates my understanding that the Northfield Area Family YMCA assumes no responsibility for injuries or illnesses sustained as a result of any physical condition or resulting from participation in an YMCA program or activity. I expressly acknowledge on behalf of my minor children and family members and heirs that I assume the risk for any and all injuries and illnesses that may result from participation in these activities. I hereby release and discharge the YMCA, its officers, directors, employees, and volunteers from any and all claims for accidents, injuries, death, loss, or damage which I or my family may suffer as a result of participating in these activities. I understand that Silver and Fit memberships are exempt from Nationwide YMCA Membership.

Signature _____ Date _____

THE Y. YOU BELONG HERE.



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

NORTHFIELD AREA FAMILY YMCA Membership Information & Registration Form

When you join the Y, you don't just join a community center, you join a cause. At the Y, strengthening community is our cause. We believe that positive, lasting personal and social change can only come about when we all work together to invest in our kids, our health, and our neighbors.

That's why we focus our work in three areas:

Youth Development - NURTURING THE POTENTIAL OF EVERY CHILD AND TEEN

We work to ensure youth realize their potential to become active, engaged, and thriving members of the community. The Y nurtures their socio-emotional, cognitive, and physical development through holistic youth programming, experiences, and supports.

Healthy Living - IMPROVING THE NATION'S HEALTH AND WELL-BEING

We work to improve lifestyle health and health outcomes in our community. Our work aims to help the transformation of health and healthcare from a system largely focused on treatment of illnesses to a collaborative community approach that elevates well-being, prevention, and health maintenance.

Social Responsibility - GIVING BACK AND PROVIDING SUPPORT TO OUR NEIGHBORS

We work to foster social connectedness, strengthen support networks, and encourage investment in our communities. The Y activates resources and engages people from diverse populations for individual and collective action.

BECOME A MEMBER; JOIN TODAY!

When you join the Northfield Y, you join most Ys in the nation.



**ASK US ABOUT
NATIONWIDE
MEMBERSHIP!**