

# **Southington – Cheshire Community YMCAs Summer Camp Financial Assistance Program**

We are in the process of accepting financial assistance applications for summer camp beginning **January 2<sup>nd</sup>**, **2024** until the deadline of **May 1<sup>st</sup>**, **2024**, however, applications will be reviewed continually until funds are exhausted.

-We only accept **Care 4 Kids** at our **Naciwonki Summer Adventures** childcare program at the Southington YMCA. New Care 4 Kids applications and parent provider agreements are due no later than **30 days before** the start of the first session your child is attending. Please contact us for the paper work by **May 1**<sup>st</sup> if you plan on applying. You will not be eligible for YMCA financial assistance unless you have submitted the proper paperwork to apply for Care 4 Kids.

- 1. If you would like to be considered, you must complete **ALL** of the MANDATORY information attached: **YOU MUST BE A RESIDENT OF SOUTHINGTON or CHESHIRE.** 
  - Proof of residency
  - A Financial Assistance Application completed in its entirety
  - A Copy of CURRENT YEARS Federal Tax Return
  - Copies of four most recent pay stubs for ALL income producing members of the household
  - Supplemental Income: Official documentation showing proof of **ANY** type income you or other adults in your household receive during the year. (Mandatory)
  - A **mandatory** Camp Improvement Fee for each child. This is a one-time yearly fee per child and must be paid at the time of registration.
  - Please refer to the checklist on **Page 5** of the YMCA Financial Assistance Application.
- \*Parents/Guardians are required to register their child for all camp sessions and pay a \$25 deposit per session per child in order to hold their spots while financial assistance is being determined. Registration for each child must be completed online through Camp Brain:
   Camp Sloper <a href="https://ymcacampsloper.campbrainregistration.com/">https://ymcacampsloper.campbrainregistration.com/</a>
   Camp Quinnipiac <a href="https://ymcacamppaciwonki.campbrainregistration.com/">https://ymcacamppaciwonki.campbrainregistration.com/</a>
   Naciwonki Summer Adventures <a href="https://ymcacampnaciwonki.campbrainregistration.com/">https://ymcacampnaciwonki.campbrainregistration.com/</a>

Exceptions will be made on an individual basis to set up a payment arrangement to pay the deposits and camp improvement fees and you must contact us prior to submitting your application. Once you have added your contact information, child/children's information, selected the sessions you'd like them to attend and get to the payment section, keep everything added to your cart and please stop here. Then you can call either Tara or Brittney to let us know you're ready to submit your application and we can finish entering your payment method and custom payment plan with you on the phone. For Camp Sloper registration weekend only 2/3-2/4, complete registration and select the payment method "Financial Assistance Applicants only". Then contact Tara or Brittney during the week to setup payment plans.

3. Submit your application by email, fax, mail, or return it in an addressed envelope to "Tara or Brittney in Accounting" to the front desk at the Southington or Cheshire YMCA. Once your completed application package is received, we will review it and email you to confirm receipt. All applications are reviewed and processed in the order of the date received. Application processing times are 2-4 weeks. If there are any missing items, this will cause a delay in the application being processed. Once your assistance is approved we will email you, your financial assistance agreement.

**United Way of Greater Waterbury Camperships** are also available for **YMCA Camp Sloper** and **Camp Quinnipiac.** You may be eligible if you are a resident of Bethlehem, Cheshire, Middlebury, Prospect, Southbury, Waterbury, Watertown, Wolcott, or Woodbury and meet the applicable federal income guidelines. *Please contact us for a separate application to apply.* 

Most of the answers to common questions are online and in each brochure. Please go online to our day camp link for more information by visiting: https://www.sccymca.org/summer-fun

#### **Lending a Helping Hand**

Financial assistance is not a hand-out, but a helping hand. Requests for assistance always exceed the dollars available, therefore, we ask that each applicant honestly assess their need and complete the application truthfully. Assistance is a temporary agreement and extended only in a time of need and could change from year to year. The percentage of financial assistance awarded is **valid for one year** or 365 days.

All financial assistance applications will be reviewed periodically. Each recipient will pay a portion of the fee based on the specific need of the individual or family.

Please remember that financial assistance is distributed on a "first come, first serve basis" and is subject to the availability of funds. Our decisions are made carefully using the guidelines of the YMCA of the USA. The assistance is based on gross income of the household, number of dependents and extenuating circumstances.

#### Where does our funding come from?

We count on the generosity of our members and partners to keep our doors open to whoever needs a place to go to help them be healthier, confident, connected and secure. This is not just a gym; it is a community.

Funds for financial assistance are made possible through generous financial contributions of our members, friends and corporate contributors to our Annual Support Campaign, as well as the generous support of The United Way of Southington.

#### **Our Mission**

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

The YMCA is a non-profit 501 C 3 organization.

Please feel free to contact us with any questions or concerns that you may have. We look forward to working with you and your family.

Sincerely,

### **Tara Johnson & Brittney Fontaine**

Phone: (860) 426-9590, 860-426-9515

Fax: 860-426-9586

tjohnson@sccymca.org; bfontaine@sccymca.org



Branch Name	
Date Received	
All Documents Received	

## Southington – Cheshire Community YMCAs Summer Camp Financial Aid Application

The Southington – Cheshire Community YMCAs strives to make our programs and membership available to all, regardless of their ability to pay. We use the guidelines provided by the YMCA of the USA to carefully make our decisions on assistance. Our funds for financial assistance are made possible through generous financial contributions of our members, friends and corporate contributors to our Annual Support Campaign, as well as the generous support of The United Way of Southington.

#### **ALL INFORMATION IS STRICTLY CONFIDENTIAL**

Current Status (Please check one)  □ I am not currently receiving any YMCA financia □ I am currently receiving YMCA financial assista □ Renewal □ Request of another program	
Requesting financial assistance for:	
<ul> <li>Membership: Family membership/# of ac</li> <li>Youth membership/# of children</li> <li>Camp:Camp Sloper /Camp Quinnip</li> </ul>	
Primary Adult Application:	
Home Address:	City: Zip:
Phone Number: (circle on	ne) Cell Work
Email:	
Employer:C	Occupation:
Is your home a one-adult household? (circle one) Ye	es No Not Applicable
*If Applying for childcare – please inform us of your s	schedule. Your employer must sign off. *
SUN MON TUES	WED THURS FRI SAT
In Time Out Time	
Out Time	
Employer's Signature:	Date:
Employer's Title:	
Secondary Adult Applicant:	

Home Address:		City:		Zip:	
Phone Number:	(circle one)	Home	Cell		
Email:		<del></del>			
Employer:	0cc	cupation: _			
Is your home a one-adult	household? (circle one) Yes	No	Not Applica	ble	
*If Applying for childcare	– please inform us of your sch	nedule. You	ır employer mı	ıst sign off. *	
SUN	MON TUES	WED	THURS	FRI	SAT
In Time					
Out Time					
Employer's Signature:		Da	te:		
Employer's Title:					
Name of All Manufacture	on to Hannahald (Disass	<b>6</b> 1 - 4	- 1		
Names of ALL Membe	rs in Household (Please	Complete	e)		
Name	Employer/School & Gra	ade	Birthdate	Relations	ship to
Nume	Employer/ Serioor & Gre	auc	Dir tridate	Primary A	
Diana ikawina Ali		.     .	<b>D</b>		
Please Itemize ALL yo	our "gross" annual house	enoia inco	ome. Docum	entation is i	requirea.
	Your Inc	ome		Other's Incor	ne
Salary, wages, and tips	roar inc	OTTIC		Other 5 Incor	110
Unemployment compensat	tion				
Social Security compensat					
Child Support					
Alimony					
401(k) Retirement					
School loan income					
Housing allowance					
Food Stamps					
Other					

Please assess your needs honestly. How much can you afford to pay on a monthly basis? (MUST BE ANSWERED FOR REVIEW) \$\_\_\_\_\_

Please possil	e share why you are applying for financial assistance and include as much detail as ble:
<u>Subm</u>	it your completed Financial Assistance Application with the following mandatory items:
	ENTIRE copy of the CURRENT YEARS' Federal Tax Return (1040 plus schedules) for <b>ALL</b> income producing members of the household (no summary pages)
	Copies of 4 most recent pay stubs for <b>ALL</b> income producing members of the household A signed letter from your employer with their contact information verifying your rate of pay and hours worked for <b>ALL</b> income producing members of the household
	Copies of <b>ALL</b> applicable supporting documentation listed in the above annual salary line items: Unemployment income letter from the state, state disability benefit letter, retirement income, self employment income, housing assistance, student loan assistance, scholarships/grants, state
	assistance, child support, alimony, etc.  Proof of Residency – a rental/lease agreement, mortgage statement, utility bill, or if you live with family member or friend - a signed letter with contact information from owner of property stating you reside at their address.
	Check here if you do not file a federal tax return based on federal government income guidelines.
delay	se note if any of the listed items do not accompany your financial aid application it could the determination process and your application will be moved to the bottom of the list. e check your email or SPAM folder and be on the lookout for any email correspondence. *
I gran	by declare that the information on this application is true and accurate to the best of my knowledge t permission to the YMCA to verify this information and understand if it is not accurate, my ation may be denied and any offer of financial assistance withdrawn. I agree to notify the YMCA if ancial status should change.
Signat	ure of Applicant Date

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