STRENGTHENING COMMUNITY IS OUR CAUSE

Every day we work side by side with our neighbors to make sure that everyone, regardless of age, income or background, has the opportunity to learn, grow and thrive. At the Y, no child, family or adult is turned away. We recognize that for communities to succeed, everyone must be given the opportunity to be healthy, confident, connected and secure.

At the Y, we believe lasting personal and social change can only come about when we all work together to invest in our kids, our health and our neighbors. Y financial assistance is made possible through generous donations from individuals and foundations opening up a world of Y programs and activities for you and your family including: membership, youth sports, teen programs, youth programs, parent/child programs, childcare, camps and more.



YMCA OF METUCHEN, EDISON, WOODBRIDGE & SOUTH AMBOY ymcaofmewsa.org

METUCHEN BRANCH YMCA

65 High Street Metuchen, NJ 08840 732 548 2044

EDISON BRANCH YMCA

1775 Oak Tree Road Edison, NJ 08820 732 494 3232

SOUTH AMBOY BRANCH YMCA

200 John T. O Leary Boulevard South Amboy, NJ 08879 732 553 9622

YMCA AT THE PISCATAWAY COMMUNITY CENTER

520 Hoes Lane Piscataway, NJ 08854 732 562 2302



OUR MISSION

Our YMCA is a charitable organization rooted in Judeo Christian values. We are devoted to supporting individuals and families in their quest to realize their full potential through programs and services that foster youth development, healthy living and social responsibility.



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING

EVERYONE HAS THE RIGHT TO BE HEALTHY

MEMBERSHIP ASSISTANCE

YMCA of Metuchen, Edison, Woodbridge & South Amboy

YMCA at the Piscataway Community Center



FREQUENTLY ASKED QUESTIONS

Q: What is Membership Assistance?

A: The YMCA of MEWSA believes that everyone has the right to be healthy regardless of their ability to pay. The Membership Assistance Program provides support for YMCA membership at the Metuchen, Edison or South Amboy full facility branches. Membership Assistance is supported in part through charitable contributions to the YMCA.

Q: Who is eligible for Membership Assistance?

A: Anyone may apply for membership assistance! Financial assistance is based on family income, number of household members and personal circumstances. If you feel you may be eligible for assistance, please complete this application and return to the branch of your choice along with any supporting documents requested. You may also provide pertinent information which you feel will support your request for assistance.

Q: How will the Membership Assistance amount be determined?

A: The Membership Assistance level is determined using an incomebased sliding-fee scale; awards may be adjusted for extenuating circumstances.

Q: How quickly can I expect to receive word on my application?

A: Determinations are made within three business days under normal operating circumstances. Applicants are notified in writing by regular mail or email. Upon notification of an award, please visit the Welcome Center at the selected YMCA branch to finalize your membership.

Q: How long will Membership Assistance continue?

A: Membership assistance is provided on an as-needed basis. The award letter will outline details of your scholarship.

Q: If I receive Membership Assistance, what's expected of me?

A: Need for assistance is assessed at time of initial application. The YMCA will request that you provide updated information or documentation on an annual basis as detailed in your award letter.

Q: Who will be reviewing my application?

A: Your application and supporting documents are treated as highly confidential. Only the Branch Director or his/her designee will review your application and any additional information you provide.

Q: What do I do if I require assistance for YMCA programs or child care, in addition to membership?

A: Please obtain a program or child care financial assistance application at one of our YMCA branches or from our website at www.ymcaofmewsa.org.

Effective 10/2019

MEMBERSHIP ASSISTANCE APPLICATION

① APPLICANT INFORMATION (PRIMARY) Name	② I AM APPLYING FOR □ NEW APPLICATION □ RENEWAL
	- HEW ALTERCATION - KEINEWAL
Address	BRANCH
<u>City</u> <u>State</u> <u>Zip</u>	☐ Metuchen Branch ☐ Edison Branch
Phone Alt Phone	South Amboy Branch Piscataway Branch
Email	This application is for a YMCA membership only. A separate financial assistance form is available for YMCA Programs and
Preferred method of regular communication: Email Phone Regular Mail	Child Care. Contact your local branch for details!
3 LIST ALL ADDITIONAL PERSONS LIVING IN HOUSEHOLD (Check ✓ for each person applying for assistance) Last Name First Name DOB Aqe M/F □ □ □ □ □ □ □ □	
Attach additional sheets if necessary.	
 DOCUMENTATION REQUIRED (Please supply one of the following) Most recent tax return	
Annual Household Income:	
TELL US MORE! Please feel free to share additional information or extenuating circumstances to support your request for assistance. ☐ Separate statement attached. Check ✓ if separate statement attached.	
S I attest that the information I have provided and the documentation attached is an accurate reflection of my current financial income. I understand that any support received through this application will apply to YMCA membership fees only at the branch designated by me in this application. Signature:	
3	
FOR STAFF USE ONLY: Branch: Terms Approved:	Membership ID#:
Signature:	

PLEASE RETURN THIS APPLICATION TO THE YMCA BRANCH WHERE YOU WISH TO PARTICIPATE.

A SEPARATE MEMBERSHIP APPLICATION IS ALSO REQUIRED WHEN APPLYING FOR MEMBERSHIP ASSISTANCE.