

***At the YMCA of Regina, we offer opportunities to all members of the community regardless of economic circumstance. Men, women, and children come to the YMCA to grow and develop their spirit, mind and body. Regular participation in YMCA programs and membership activities supports a balanced approach to personal growth, health and welfare. By supporting the development of healthy individuals the YMCA helps to build strong kids, strong families and strong communities.***

***Our Membership Assistance Program serves those individuals and families who have the greatest need in our community. They are willing, but unable, to pay the full fee for their YMCA membership or programs.***

#### *Statement of Purpose*

The YMCA in Canada is dedicated to the growth of all persons in spirit, mind and body and in a sense of responsibility to each other and the global community.

#### *Mission Statement*

The YMCA of Regina is a charitable association open to all, dedicated to developing leadership and enriching our community and people at every stage of life.

#### *Our Vision*

YMCA of Regina develops the future leaders of our community.

#### *Our Core Values*

Respect, Honesty, Caring, Responsibility & Inclusiveness

#### **Privacy Statement**

The YMCA of Regina is committed to protecting personal information by following responsible information handling practices, in keeping with privacy laws. We collect and use personal data to better meet your service needs, to ensure the safety of our participants, for statistical purposes, to inform you about the YMCA programs in which you are registered, and to satisfy government and regulatory obligations. You may also receive periodic mailings from us with information about other YMCA programs and services that may interest and benefit you.

Any photographs or video taken of you while at the YMCA of Regina or involved with its programs by an employee or representative of the YMCA of Regina, will become the property of YMCA of Regina, and may be used for various promotional purposes. If you or your family wishes otherwise, please inform the YMCA of Regina.

By signing this form you acknowledge the above use of your personal information and image without compensation.

## **FREQUENTLY ASKED QUESTION**

### **Who is eligible for the YMCA Membership Assistance Program?**

People whose financial circumstance makes them willing but unable to pay the full fee for a general membership or programs.

### **How does the YMCA determine how much I pay?**

The program has been developed so that each family or individual will contribute as much as they can afford. The amount of assistance will vary on factors such as the amount of income and expenses for the household. The amount of assistance cannot be determined without going through the application process.

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

No. Everyone must pay a portion of the fee.

### **If I receive YMCA financial assistance, what is expected of me?**

All information you provide will be kept confidential. We expect the same confidentiality from you. A YMCA membership also requires a commitment of completing your payments and of using your membership a minimum of twice a week on a regular basis.

### **How do I pay for my membership?**

All applicants must pay their first month when they join and payments must be arranged for the remaining months. Pre-authorized chequing, American Express, Visa, Mastercard, Interac or cash are all accepted. Assisted memberships are approved for up to six months. It is necessary to reapply with another interview to renew your membership.

### **Where does the money come from to support the YMCA Financial Assistance Program?**

The YMCA of Regina raises money through its Strong Kids Annual Support Campaign, the YMCA Endowment Fund, organizations and anonymous donors.

## **HOW TO APPLY FOR ASSISTANCE**

### **NEW APPLICANTS**

1. Complete the application IN FULL, providing all required documentation (See list on reverse side). The financial assistance rates are assessed on BASIC NEEDS. If you are living with someone and sharing expenses, we need documentation confirming **TOTAL HOUSEHOLD INCOME**. Please provide the most recent monthly information.
2. Bring in the above documentation and make an appointment at our Membership Services Desk for an interview. The interview cannot be booked until we have all your documentation.
3. **If you are unable to make your appointment, please let us know 24 hours in advance to cancel or you will be required to wait one month before re- applying.**
4. Participate in a facility tour and receive facility information.
5. For sessional programs, be prepared to pay in full. For ongoing programs paid on a monthly basis and for memberships, be prepared to make your first month's payment, as well as provide a method of pre-authorized payment (void cheque, American Express, Visa or Mastercard) for the remaining months. Should your bank for any reason not honour any pre- authorized payment there will be a \$5 service charge added on to the original fee in addition to any fees the bank may make.

### **RENEWING APPLICANTS**

The aim of the Membership Assistance Program is to assist those who are unable to pay the full membership or program fee. In the case of memberships, our goal is to have members contribute more financially towards it each time they renew.

We recommend that you complete the application to reassess and provide CURRENT documentation at least one month before your membership expires so that you can continue your membership. **You will not be permitted to access our facility without a current membership.** To set up your appointment please stop by our Membership Service Desk.

Name	
First Name	Last Name

Residence Address	
Street	
City	Postal Code

Telephone Numbers		
Home	Business	Cell

Email Address	
Home	Business

Family Information				
Name (include last name if different)	Gender	Birth date (M/D/Y)	Relationship	Employer/School
1.		/ /		
2.		/ /		
3.		/ /		
4.		/ /		
5.		/ /		
6.		/ /		
7.		/ /		

Emergency Contact Information		
Name	Relationship	Phone Number

Signature \_\_\_\_\_ Date \_\_\_\_\_

To Be Completed by YMCA Staff					
<input type="checkbox"/> Membership <input type="checkbox"/> Program <input type="checkbox"/> Kiddie Kare (only 25%, 50% or 75%)	Monthly Payments:  \$ _____	Date Info Checked	Date Approved	Date Entered	Date Audited
		Info Checked By	Approved By	Entered By	Audited By
Assistance Percentage _____%					
Kiddie Kare Percentage _____%					

Membership Category	
<input type="checkbox"/>	Family
<input type="checkbox"/>	Adult
<input type="checkbox"/>	Young Adult
<input type="checkbox"/>	Post Secondary
<input type="checkbox"/>	Teen
<input type="checkbox"/>	Youth
<input type="checkbox"/>	Preschool

Birth date	Gender
MM/DD/YYYY / /	Male Female

Documentation
Monthly Household Income
Bank Statements (Cheq & Sav)
Other Income (alimony, child tax credit, social assistance, WCB, child support etc):
Rent or Mortgage
Property Taxes
Home & Car Insurance
Utilities ( gas, power, water)
Phone, Cable & Internet Bills
Doctor Prescribed Medical Expenses
Car Loan
Household Expenses( food, clothing, etc)
Credit Card and Loans (showing minimum payments)
Gas & Transport Expenses
Child Care
Other Monthly Expenses
Staff Initials:



# Membership Assistance Guide & Application

Membership Assistance appointments cannot be booked until we have all your information



**YMCA**

We build strong kids,  
strong families, strong communities.

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