



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

WELCOME TO ALL People Helping People

THE ESSENCE OF THE Y

With a commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility, the YMCA of San Angelo ensures that every individual has access to the essentials needed to learn, grow and thrive.

EVERYONE IS WELCOME

The YMCA welcomes all who wish to participate and believes that no one should be denied access to the Y based on their ability to pay. Through our Scholarship Program, we provide assistance to youth, adults, and families based on individual needs and circumstances.

COMMITTED TO OUR COMMUNITY

Determining assistance amounts is handled by the YMCA in a fair and consistent manner. Every YMCA member receives the same membership benefits, regardless of whether or not they receive a scholarship. YMCA members can feel confident knowing that they are a part of an organization that cares greatly for the well-being of all people, and is committed to youth development, healthy living and social responsibility.

Our scholarship will help in reducing membership fees, sports, aquatics, and childcare programs. Most scholarships will be granted in 12 months. We request that individuals and families re-apply on the indicated date with their updated documents. Membership fees are subject to change when you re-apply. If you do not re-apply, your membership will expire, and/or will have to pay the full rate for other programs.

for more information contact:

Larissa Rivera

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Financial Assistance



United Way
Concho Valley





Date Received: ____/____/____

Staff initials: _____

Financial Assistance Application

To apply for financial assistance, please bring the following information to the YMCA of San Angelo.

Completed Financial Assistance Application, signed and dated.

Household income: (For all working adults within the household, please provide the following)

- One month of current pay stubs (ex: Bi-weekly - 2 paystubs are needed, weekly - 4 paystubs are needed)
- Tax Returns if self-employed (Current year required after April 15)

Please allow 7 - 10 business days to
receive an answer.

Turning in an incomplete form can result in
an extended waiting period.

Other Documentation:

- Proof of government assistance, such as housing, SNAP, Social Security, disability, etc
- Proof of child support payments
- Proof of all other income such as contractual work, unemployment checks, etc
- School Schedule (if college student)

EMAIL MUST BE PROVIDED

Adult 1 | Guardian 1:

Full name: _____ Date of Birth: _____

Address: _____ City: _____ Zip Code: _____

Phone Number: _____ Email: _____

☐ Student, How many hours? _____ Place of Employment: _____

Adult 2 | Guardian 2:

Full name: _____ Date of Birth: _____

Phone Number: _____

☐ Student, How many hours? _____ Place of Employment: _____

List all household members including applicant/parent, siblings and/or spouse

	First Name	Last Name	Gender	Age	Date of Birth	Relationship to Applicant
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

I certify that the above information is true and complete to the best of my knowledge. I agree to inform the YMCA immediately of any changes in income or family size. I understand that false or incomplete information could jeopardize my financial assistance and that I MUST APPLY AGAIN EVERY YEAR. RATES WILL REVERT TO STANDARD PRICING AT EXPIRATION UNLESS A NEW SCHOLARSHIP IS AWARDED.

Applicant Signature: _____ Date: _____

OFFICE USE ONLY:

Wages: _____ Social Security: _____ Food Stamp: _____ Unemployment: _____ Child Support: _____

Retirement: _____ Other: _____

Total Annual: _____ ☐ Approved for _____ ☐ Denied