



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## Southington-Cheshire YMCA Summer Camps

We are in the process of accepting applications for financial assistance.

**The application deadline is April 1 of the current year; however applications will be reviewed continually until funds are exhausted.**

If you would like to be considered, you must complete ALL of the information attached. You can either scan and email, fax, mail, or return it in person, in an addressed envelope, to my attention, **Brittney Fontaine**, at the Southington Community YMCA. Once your completed application package is received, I will review it and email you to confirm receipt. If there are any missing items, this will cause a delay in the application being processed. All applications are reviewed and processed in order of the date received. Once your application is approved I will email you a financial assistance agreement to sign and return to me within 7 days.

If registering for YMCA Camp Sloper, scholarships can only be applied to **TRADITIONAL** camp sessions and before and after care only. We do not offer assistance for specialty camps.

**Care 4 Kids** is only accepted at **Naciwonki Summer Adventures** childcare program. 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. You can contact me for the paper work May 1<sup>st</sup> if you plan on applying.

Please go online to our day camp link for more information by visiting: <https://ymcacampsloper.org/day-camp-home-0> Most of the answers to common questions are online and in each brochure.

Registration for each child is completed online through Camp Brain. Follow the link to register: <https://www.sccymca.org/summer-fun>

- **Camp Sloper** - <https://ymcacampsloper.campbrainregistration.com/>
- **Camp Quinnipiac** - <https://ymcacampquinnipiac.campbrainregistration.com/>
- **Naciwonki Summer Adventures** - <https://ymcacampnaciwonki.campbrainregistration.com/>

**The following is needed to complete a financial assistance application:  
YOU MUST BE A RESIDENT OF SOUTHINGTON or CHESHIRE.**

(Proof of residency is required)

- A Financial Assistance Application completed in its entirety (Mandatory)
- A Copy of CURRENT YEARS Federal Tax Return (or W-2 if tax return has not been filed yet.) (Mandatory)
- Copies of three recent pay stubs for **ALL** income producing members of the household (Mandatory)
- Copy of Employment schedule verification -Signed by Employer
- 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.
- A Camp Deposit for each session of camp for each child. (Exceptions will be made on an individual basis and you must call me prior to submitting your application.)
- If you would like to set up a payment arrangement to pay the deposits and camp improvement fees: When you get to the payment section you may save what you have in your cart and then contact me when all of the registration questions have been completed and I can submit the application for you and then help you set up payments so you do not have to pay all at once.

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

Sincerely,  
Brittney Fontaine  
Accounting Associate  
Phone:(860) 426-9515 Fax: 860-426-9586  
[bfontaine@sccymca.org](mailto:bfontaine@sccymca.org)



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# Southington – Cheshire Community YMCAs

## Financial Assistance Program

### 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.

### 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.

### How to apply?

Financial assistance applications and membership forms are available at the YMCA front desk or online at either [sccymca.org](http://sccymca.org) or [ymcacampsloper.org](http://ymcacampsloper.org). The application must be completed in its entirety and appropriate documentation must be submitted before the application can be processed.

Once we receive your application, we will contact you within two weeks to discuss the status of your application. 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.

### 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.



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Branch Name	
Date Received	
All Documents Received	

## Southington – Cheshire Community YMCAs

### 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 fund 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 Financial Assistance.
- I am currently receiving YMCA financial assistance and this application is for:
  - Renewal
  - Request of another program

Requesting financial assistance for:

- Membership
- Childcare: \_\_\_Preschool/ \_\_\_ School Age Childcare / \_\_\_ SACC Fun Days/Snow Days
- Camp: \_\_\_Camp Sloper / \_\_\_Camp Quinnipiac / \_\_\_Naciwonki Summer Adventures
- Programming: \_\_\_Youth Sports / \_\_\_Swim Lessons / \_\_\_Sports Performance(SPC)
- Other: \_\_\_\_\_

**Please note for Childcare and Camp financial assistance working hours are required from both parents and signed by your employer.**

**Primary Adult Application:** \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ (circle one) Home Cell

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Is your home a one-adult household? (circle one) Yes No Not Applicable

**\*If Applying for childcare – please inform us of your schedule. Your employer must sign off.\***

	SUN	MON	TUES	WED	THURS	FRI	SAT
In Time							
Out Time							

Employer’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employer’s Title: \_\_\_\_\_

**Secondary Adult Application:** \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ (circle one) Home Cell

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Is your home a one-adult household? (circle one) Yes No Not Applicable

***\*If Applying for childcare – please inform us of your schedule. Your employer must sign off.\****

	SUN	MON	TUES	WED	THURS	FRI	SAT
In Time							
Out Time							

Employer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employer's Title: \_\_\_\_\_

**Names of ALL Members in Household (Please Complete)**

Name	Employer/School & Grade	Birthdate	Relationship to Primary Applicant

**Please itemize ALL your "gross" annual household income. Documentation is required.**

	Your Income	Other's Income
Salary, wages, and tips		
Unemployment compensation		
Social Security compensation		
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 share why you are applying for financial assistance and include as much detail as possible:**

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**Submit your completed Financial Assistance Application with the following items:**

**\*Please note if any of the following items do not accompany your financial aid application it could delay the determination process and your application will be moved to the bottom of the list. Please check your email or SPAM folder and be on the lookout for any email correspondence. \***

- Current year's Federal Tax Return or most recent W-2
- Copies of FOUR of your most current paystubs or a signed letter from your employer with their contact information stating your annual salary
- Copies of ALL applicable supporting documentation listed in the above annual salary line items: Unemployment, disability income, SNAP benefits, 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 or utility bill
- OPTIONAL: you may provide documentation of your monthly expenses.
- I do not file a federal tax return base on federal government income guidelines.

I hereby declare that the information on this application is true and accurate to the best of my knowledge. I grant permission to the YMCA to verify this information and understand if it is not, my application may be declined and any offer of financial assistance withdrawn. I agree to notify the YMCA if my financial status should change.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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