

# **Membership Assistance Application Form & Guide**

First Name		Last Name			Conditions of Membership	
Birthdate (DD/MM/YY)		Gender (Circle)	Gender (Circle) Male / Female / X Not Specified		I agree to assume all risk involved in being a YMCA of Regina	
Residency Information					member or participating in YMCA programs.	
Street Address	I agree to identify and name harmless the YMCA of Regina, its servants and agents, relieving them of all liability for losses or damages of all and every description I may suffer to be put to.					
City		Postal Code			I understand the YMCA of Regina is not responsible for person-	
Home Telephone	Cellular Te	lephone	Business Telephor	ne	al property lost or stolen while members and/or program par- ticipants are using the YMCA of Regina facilities or are on YMCA	
Email Address					premises.	
Family Information (Family Member	Should my bank, for any reason, not honour any pre-					
Name	Gender	Birthdate (DD/MM/YY)	Relationship	Membership	authorized payment, I understand that I am still responsible for the payment plus a service charge of no more	
(Incl. last if different from above)				Category	than \$5.00. This is in addition to any service fees my bank may make. The YMCA of Regina will automatically resubmit the payment, plus the service charge, along with my next	
1.						
2.					payment. If the subsequent payment is also not honoured, the	
3.					YMCA of Regina will terminate my membership and future scheduled payments until I have brought all payments up to date.	
4.						
5.					I understand that the YMCA of Regina reserves the right to close areas of the building in order to upgrade and/or maintain	
<b>Emergency Contact Information</b>	facilities and equipment to better serve the needs of all our					
l Name Relationshi		ationship	p Phone Number		members. No refunds or credits will be issued due to such closures.	
Payment Authorization						
Account Holder First Name	I consent to receiving the YCMA of Regina's newsletter and other commercial messages regarding the YMCA of Regina's products and services. I may withdraw consent at any time by contacting Membership Services or using the Opt Out feature in online communications.					
Account Holder Address (If different fro						
Payment Type ☐ Visa ☐ Master Last 4 Digits of Card						
Last 4 Digits of Card: Expiry: /  Signature Date (DD/MM/YY)					I give my permission to the YMCA of Regina to use indefinitely, without limitation or obligation, photographs, film, or tape recordings which may include my or my families image or video	
*Form must be signed by Parent of Gua	raian if member is	s unaer tne age of 18			for the purposes of promoting or interpreting YMCA of Regina	
Internal Use Only: Assistance	programs.					
Date Approved (DD/MM/YY):						

# **Frequently Asked Questions**

## Who is eligible for the Membership Assistance Program?

Anyone whose financial circumstances make them willing but unable to pay the full fee for a general membership.

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

The program is developed so each family or individual will contribute a portion of the full fee based on annual household incomes. The amount varies depending on the financial needs of the household income earners and a sliding scale of LICO (Low Income Cut Offs) as determined by government agencies such as Social Services.

### How do I pay for my membership?

All applicants must pay their first payment up front when they join, subsequent payments are arranged through automatic withdrawal from a bank account or charged to a credit card. Those who do not wish to provide banking information can pay for three months in advance.

# Where does the money come from to support the YMA Membership Assistance Program?

The YMCA of Regina raises money through its Strong Kids support campaigns, the YMCA Endowment Fund, and donations from organizations and individuals.

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

No. Everyone must pay a portion of the membership fees.

#### If I receive 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 maintaining good payment status and abiding by the YMCA core values: Caring, Respect, Honesty, Responsibility, and Inclusiveness.

#### What is the cancellation policy for the Membership Assistance Program?

Assisted members are required to provide 14 days written notice of their decision to cancel their membership.



# **Membership Assistance**

The YMCA of Regina offers opportunities to all members of the community regard-less of economic circumstances. Men, women, and children come to the YMCA of Regina 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, families and 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 memberships.

# **How to Apply**

- 1. Complete the application form and acknowledge the terms and conditions on this form.
- 2. Gather a Notice of Assessment (NOA) showing the net income for each income earner 18 and older in your household. One NOA is required for each adult even if the total net income is zero.
- 3. Bring the completed application and Notice(s) of Assessment to your closest YMCA Regina branch for review.
- 4. Re-application is required at the expiry of each Assisted Membership term.

YMCA Northwest 5939 Rochdale Blvd.	YMCA Downtown 2400 13th Ave.	YMCA East 1825 E Victoria Ave.
Regina, SK	Regina, SK	Regina, SK
S4X 2P9	S4P 0V9	S4N 6E6

All Locations Call: (306) 757-9622