



# WE HERE FOR YOU

# **Open Doors Program**

# **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. Our Open Doors program is made possible through generous donations from individuals, businesses and foundations opening a world of Y programs and activities for you and your family including: membership, healthy living programs, youth sports, summer day camp, out of school time programs and more.

Please return this application to the Mesabi Family YMCA.



#### MESABI FAMILY YMCA

8367 Unity Drive, Virginia MN 55792 • 218-749-8020 • mesabiymca.org



# **Open Doors Application**

Apply for a Y membership or program in five easy steps!

Name	DC	В
Email		
Mailing Address		
City	State	Zip
Home Phone	Cell	

	2 ADDITIONAL FAMILY MEMBERS		
	2 <sup>nd</sup> Adult	DOB	
	Child	DOB	
•			,

## 3 I AM APPLYING FOR

Please check one of the following:

- O Teen / Young Adult Membership
- O Adult Membership
- O Active Older Adult Membership
- O **Family Membership** Two adults with/without children residing at the same address.
- O Program (Please specify program)

#### **FOR OFFICE USE ONLY**

Category

Number

Applicant \$

YMCA \$

Annual Income \$

**Down Payment Amount \$** 

### **4** PLEASE PROVIDE THE FOLLOWING INFORMATION

Please check one of the following:

- O I filed a tax return last year my most recent 1040 form is attached \*W-2's and pay stubs will not be accepted as proof of household income
- O I did not file a tax return last year

If your household income has changed since you filed your tax return, please indicate your total annual household income here:

\$

**TELL US MORE...**Use this space to include any additional information or extenuating circumstances that were not included on this application. If you need more space, attach an additional piece of paper.

I want/need a Y membership because:

I certify that the above information is true and complete to the best of my knowledge, and that I do not have additional income not represented above. I agree, if necessary, to provide additional information and documentation to support the above statements. I understand that the amount of membership and program assistance provided is based on the Y's available resources. I understand that if I falsify any of the above information, I will not be eligible for assistance now and in the future.

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Signature of person completing this form

Date

Attach all financial documents and turn in at the Y Member Services Desk. Payment plans are available. Note that all incomplete applications, or applications submitted without proper income documentation, cannot be reviewed. All records are kept confidential. Applications take up to two weeks to process. Ask how you can get started right away.