

YMCA Programs

Child Care: Kinder is for children in Pre-K or Kindergarten. Children are transported from school and provided lunch. At 3:00 p.m. they become part of Prime Time. **Prime Time** is for elementary school children. The children are transported from school to the YMCA and have time to do homework, as well as swim and play games. **Summer Day Camp** is for school-age children. Weekly field trips and projects follow a theme-based format. **Camp Sunshine** is for children ages 6-17 with special needs. Campers participate in daily structured activities that include crafts, swimming, and field trips. *For all child care programs, a \$30 annual supply fee per child is required, and immunization records must be provided.*

Swim Lessons: Swim lessons are for adults and children ages six months and up. Classes are separated by age and skill level.

Youth Sports: Our sports program includes indoor/outdoor soccer, t-ball, and basketball. Each league is non-competitive and offers an opportunity for each participant to learn lessons that carry beyond the sporting field. The result is that every child has a positive experience, a league ball, and a reward for their participation.

Membership: Financial assistance is available for individuals, single parents, families, senior individuals, senior couples, and students. A member receives access to the health and wellness center, pool, land and water group exercise classes, gymnasium, and indoor track. *Some classes and/or programs may have an additional cost.*

Cleveland County
Family YMCA

1350 Lexington
Avenue
Norman, OK 73069



Phone: (405)
364-YMCA (9622)

Fax: (405) 364-9799

The mission of the YMCA is to put Christian principles into practice through programs that build healthy spirit, mind & body for all.



Cleveland County Family YMCA
S.T.E.P. Program

Scholarships To
Enable
Participation



STEP Program Application

Today's Date: _____

(circle one) NEW

RENEWAL

How is the STEP program possible?
Individuals and businesses in the community contribute to the Cleveland County Family YMCA's **Strong Communities Campaign**, which funds the financial assistance program for low-income families and individuals.

How is the assistance amount determined?
Your award amount will be based on gross income and number of dependents. However, for consideration, all documentation must be attached, and the application must be fully completed.

How much will I have to pay?
Award amount is based on a sliding scale. We believe that financial assistance recipients are contributing members to the YMCA family. Therefore, all applicants will be asked to pay a percentage of the fee.

How soon will my amount be determined?
Applications will be reviewed within 7 business days. Please submit your completed application along with proof of income, including two most recent pay stubs, current tax return, and public assistance verification. Also, if requesting assistance for dependents, supporting documentation must be attached.

What if I don't have a current tax return?
Please call the IRS at 1-800-829-1040 for a free copy of your 1040 stating gross income and verification of dependents.

Will my children be treated differently because our family receives financial assistance?
No. Your application and financial documentation will be kept confidential. Financial assistance is recorded for accounting purposes, but names are never published without prior permission.

Is there anything a recipient can do in return?
Yes! The YMCA always needs volunteers in the facility, at special events, or for a special project. Contact the Volunteer Coordinator for information.

Requesting Membership Assistance for (circle one): Family * Single-Parent Family * Individual * Sr. Citizen * Sr. Couple
Program Assistance: Pre-K/Kynder * After School * Sports * Swim Lessons * Summer Camp * Other (please specify): _____

Application must be legible, completed in full and include all proof of income to be considered for approval.

Applicant's Name: _____ Spouse's Name: _____
Telephone Number: _____ Spouse's Employer: _____
Address: _____ Spouse's Title/Position: _____
City/Zip: _____ Spouse's Work Number: _____
Employer: _____
Title/Position: _____
Work Number: _____

Please list all members of your family, including yourself:

Name:	Relationship:	Birthdate:	Age:	Gender:	School/Grade:
_____	self	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TO BE CONSIDERED FOR APPROVAL, THIS SECTION MUST BE COMPLETED AND THE FOLLOWING DOCUMENTATION MUST BE INCLUDED: Last 2 pay stubs, current income tax return, public assistance if applicable (i.e. Food Stamps, Housing, TANF benefits, SSI) and verification of dependents.

	Applicant	Spouse	Monthly Expenses
Salary/Wages/Unemployment	\$ _____	\$ _____	House/Rent \$ _____
Child Support	_____	_____	Utilities _____
Alimony	_____	_____	Childcare _____
State/Red Aid (SSI)	_____	_____	Medical _____
Food Stamps	_____	_____	Education _____
Retirement/Pension	_____	_____	Other _____
Housing Subsidy	_____	_____	Total \$ _____
Workman's Comp	_____	_____	
Financial Award Letter/Student	_____	_____	
Total Monthly Income	\$ _____	\$ _____	

I certify that all of the above information is true and complete to the best of my knowledge.

Signed: _____ Date: _____