



YMCA of Memphis & the Mid-South

Childcare Income Based Rates/Fee Assistance Application

Date: _____

Child's Name: _____ Before School After School Both Summer Camp

Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Number of Dependents: _____ Single Married Other _____

Mother: _____ Father: _____

Annual Household Income:

Income Based Rates:

- \$50,000 or above
- \$40,000 - \$49,000
- \$30,000 - \$39,000

Fee Assistance:

- Less than \$30,000
- Annual Household Income: _____
- Other Income & source: _____

***Income Based Rates:** submit your income verification documents within 30 days to guarantee your reduced rate for the school year. Income can be verified in-person by your school site director, at the local YMCA, or by email to the billing department. If income is not verified within 30 days, the weekly fee will revert to the regular rates.

***Fee Assistance:** submit the following documents:

- Most recent W-2 form
- Most recent Income Tax Return
- Most recent pay check stub or letter from employer verifying latest salary
- Court Order – Child Support, if applicable

List any special circumstances that relate to your request for fee assistance (example: medical bills, unemployed, etc.) _____

Have you received fee assistance from a YMCA before? Yes No

If yes, please explain: _____

The information I have provided is true and correct. _____
Signature

For Office Use Only		
Verified Annual Household Income: \$ _____	Regular Fee: \$ _____	Approved Fee: \$ _____
Signature of Approval: _____		Date: _____