

KANKAKEE AREA YMCA OPEN DOOR MEMBERSHIP APPLICATION



MEMBERSHIP TYPE REQUESTED

Adult _____ Family _____ New _____ Renewal _____ Change _____
Additional paperwork for pending application _____

PRIMARY APPLICANT NAME: _____

Address _____ City: _____ St: _____ Zip: _____

Email _____ Home Phone _____ Cell Phone _____

Employer _____

Preferred Method of Contact for Qualification: Phone (home) _____ Phone (cell) _____ Email _____ Letter _____

NOTE: All renewal applicants are automatically notified by letter for their requalification

DEPENDENT CHILDREN UNDER THE AGE OF 26 FOR BOTH PRIMARY AND SECONDARY ADULTS

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

Name _____ Birth Date _____

ADDITIONAL INFORMATION

- ▼ If last names of two adults on the application differ, proof of residency is required.
- ▼ If last names of dependents differ from adults, proof of dependent status is required.
- ▼ Provide COPIES of all documentation which will be destroyed upon joining.
- ▼ All applications must be submitted to Member Services in person, no sealed envelopes please.
- ▼ Approval is valid for 60 days after which all documentation is destroyed and reapplication is required.

FOR OFFICE USE ONLY

Staff Signature _____ Date _____

PRIMARY ADULT: _____

SECONDARY ADULT: _____

BIRTH DATE: _____ **GENDER:** M / F

BIRTH DATE: _____ **GENDER:** M / F

YES / NO Are you currently working or self employed?

YES / NO Are you currently working or self employed?

YES / NO Are any other adults living at your address?

<u>NAME</u>	<u>RELATION TO YOU</u>
_____	_____
_____	_____
_____	_____

YES / NO Do you have any family and/or friends who help you with living related expenses (rent, utilities, food, etc.) or who allow you to live with them? Please provide specific details of the assistance you are receiving from family and/or friends and how you are living:

REQUIRED INFORMATION & DOCUMENTATION

YES / NO Federal Tax Form 1040
(Including W-2's and all supporting schedules)

YES / NO Federal Tax Form 1040
(Including W-2's and all supporting schedules)

YES / NO Two most recent consecutive pay stubs for all jobs
(Indicating gross amount received and pay period)

YES / NO Two most recent consecutive pay stubs for all jobs
(Indicating gross amount received and pay period)

YES / NO Unemployment Gross Weekly Benefit Statement
(Proof of benefits exhausted/denied if applicable)

YES / NO Unemployment Gross Weekly Benefit Statement
(Proof of benefits exhausted/denied if applicable)

YES / NO Social Security Monthly Benefit Amount Letter
___Self and/or ___Dependents

YES / NO Social Security Monthly Benefit Amount Letter
___Self and/or ___Dependents

YES / NO Foster Child(ren) Income (Voucher)

YES / NO Foster Child(ren) Income (Voucher)

YES / NO Disability Monthly Benefit Statement

YES / NO Disability Monthly Benefit Statement

YES / NO Workmen's Compensation Benefit Statement

YES / NO Workmen's Compensation Benefit Statement

YES / NO Retirement/Pension Monthly Statement

YES / NO Retirement/Pension Monthly Statement

YES / NO SNAP (food stamps)

YES / NO SNAP (food stamps)

YES / NO Child Support Received

YES / NO Child Support Received

YES / NO CCR&R Benefits (co-pay statement required)

YES / NO CCR&R Benefits (co-pay statement required)

YES / NO Housing Assistance (HUD, Section 8, other)
HUD___ Section 8___ Other_____
Statement/voucher with both rent/subsidy amounts

YES / NO Housing Assistance (HUD, Section 8, other)
HUD___ Section 8___ Other_____
Statement/voucher with both rent/subsidy amounts

YES / NO LIHEAP Annual Energy Assistance (past 12 mo.)

YES / NO LIHEAP Annual Energy Assistance (past 12 mo.)

YES / NO PIPP (bill or statement)

YES / NO PIPP (bill or statement)

YES / NO WIC Benefits?

YES / NO WIC Benefits?

I certify that I have disclosed, to the best of my belief, all sources of household income and subsidies for this application. I understand that falsification or non-disclosure of any household income or subsidy will result in the ineligibility of open door membership qualification.

APPLICANT SIGNATURE: _____

DATE: _____

KANKAKEE AREA YMCA OPEN DOOR MEMBERSHIP



GUIDELINES

- ▼ Applying for Open Door is voluntary and not a requirement of membership
- ▼ Open Door Membership is offered for adult and family memberships with annual household income less than \$55,000
- ▼ The more documentation and information you provide, the better and more timely we are able to serve you
- ▼ Periodic re-qualification of Open Door is required; failure to do so will result in the loss of assistance and the full membership rate will apply
- ▼ Falsification or non-disclosure of any household income or subsidy will result in the ineligibility of open door membership
- ▼ Applicants providing all required documentation who meet the eligibility guidelines may qualify for a reduced membership fee and enrollment fee

HOW TO APPLY

- ▼ Complete the Open Door Application, including signature
- ▼ Attach copies of all income documentation as stated on the application
 - Helpful sources of Information - Child Support Statement: www.childsupportillinois.com/
 - Unemployment Weekly Benefit Statement: www.ides.state.il.us
 - Child Support Benefit Statement: www.ilsdu.com
- ▼ Submit all paperwork to Member Service staff for verification of complete application
- ▼ Review Committee processes applications and determines qualification
- ▼ Incomplete applications will not be reviewed by committee
- ▼ Applicants are notified by telephone, letter, or email
- ▼ Membership activation is a separate process which must be completed at Member Services once you have been notified of your qualification eligibility

**Thank you for your interest in membership at the Kankakee Y!
If you have any questions, please contact Member Services at (815) 933-1741.**