



MAKING AN IMPACT

Greater Waterbury YMCA

## OPEN DOORS APPLICATION

☐ New ☐ Renewal

Serving: Waterbury, Wolcott, Prospect, Thomaston, Watertown, Oakville, Woodbury, Middlebury, Southbury, and Bethlehem.

Questions about Open Doors? Contact Zoraida at 203.754.9622 or at [ztorres@waterburymca.org](mailto:ztorres@waterburymca.org)

### Primary Adult

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### All Persons Living in the Household

| Name | Relationship | Date of Birth | Age | Gender |
|------|--------------|---------------|-----|--------|
|      |              |               |     |        |
|      |              |               |     |        |
|      |              |               |     |        |
|      |              |               |     |        |
|      |              |               |     |        |
|      |              |               |     |        |
|      |              |               |     |        |

### Type of Assistance Requested:

Membership: ☐ Young Adult ☐ 1 Adult ☐ 2 Adults ☐ 2 Adults + Children ☐ 1 Adult + Children ☐ Senior ☐ Senior Couple

Programs: ☐ \*\*Camp ☐ School Age Childcare ☐ Swim Lessons ☐ School Readiness

**Monthly Income:** Please note that if you only receive SNAP, you will not qualify for assistance. Your application will be denied.

Unemployment: \_\_\_\_\_ Social Security: \_\_\_\_\_  
Child Support: \_\_\_\_\_ SNAP: \_\_\_\_\_  
Employment: \_\_\_\_\_ TFA, Cash Assistance: \_\_\_\_\_  
Pension or Retirement: \_\_\_\_\_ Other: \_\_\_\_\_  
Disability: \_\_\_\_\_ Other: \_\_\_\_\_

**To qualify for assistance, we require you to provide: Your tax return from the prior year or SSI, DSI or Cash Assistance. If you cannot provide these documentation your application will be denied.**

**Tell us more:** Use this space to include any additional information or extenuating circumstances that were not included on the form.

### Acknowledgement

I am requesting assistance from the Y and I certify that all information submitted above is complete and accurate. I understand and acknowledge that as a participant in the YMCA Financial Assistance Program, I may be expected to provide proof of income every 12 MONTHS, or at the start of a new program session. If I do not verify information every 12 months, or at the start of a new program session, as requested, my rate will be subject to increase to the published rate that does not require income verification. If my situation changes, I agree to notify the Y. If I submit false or inaccurate information or fail to notify the Y of a change within 30 days, I may be terminated from the YMCA Financial Assistance Program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Sliding Scale: To see if you qualify for the financial assistance program, please see the below sliding scale.

### Membership or Program Discount

| Family Size | 75%      | 70%      | 60%      | 50%      | 40%      | 30%       | 20%       | 10%       |
|-------------|----------|----------|----------|----------|----------|-----------|-----------|-----------|
| 1           | \$20,748 | \$22,344 | \$23,940 | \$25,536 | \$27,132 | \$28,728  | \$30,324  | \$31,920  |
| 2           | \$28,132 | \$30,296 | \$32,460 | \$34,624 | \$36,788 | \$38,952  | \$41,116  | \$43,280  |
| 3           | \$35,516 | \$38,248 | \$40,980 | \$43,712 | \$46,444 | \$49,176  | \$51,908  | \$54,640  |
| 4           | \$42,900 | \$46,200 | \$49,500 | \$52,800 | \$56,100 | \$59,400  | \$62,700  | \$66,000  |
| 5           | \$50,284 | \$54,152 | \$58,020 | \$61,888 | \$65,756 | \$69,624  | \$73,492  | \$77,360  |
| 6           | \$57,668 | \$62,104 | \$66,540 | \$70,976 | \$75,412 | \$79,848  | \$84,284  | \$88,720  |
| 7           | \$65,052 | \$70,056 | \$75,060 | \$80,064 | \$85,068 | \$90,072  | \$95,076  | \$100,080 |
| 8           | \$72,436 | \$78,008 | \$83,580 | \$89,152 | \$94,724 | \$100,296 | \$105,868 | \$111,440 |

\*\*Based on 2026 <https://aspe.hhs.gov/poverty-guidelines>

### Required Documentation

At the Greater Waterbury YMCA, we are committed to making our programs, services, and facilities accessible to everyone, regardless of financial circumstances. Through our Open Doors Financial Assistance Program, we provide support on a sliding scale based on family size and income, ensuring that all community members can participate.

#### Application Requirements:

To apply for financial assistance, you must submit official documentation of your household income, including:

- **A government issued ID for all applicants 18 or older is required.**
- **Most Recent Tax Return (Form CT-1040). Please provide schedule C if self-employed.**
- **Current Pay Stubs, 4 if paid weekly, 2 if paid bi-weekly.** (For all employed household members).
- **Social Security or Disability Income Letters** (Dated within six months, please provide all pages).
- **Additional Documentation** (if applicable): Unemployment, Child Support, Foster Care Income, Retirement Benefits, SNAP (Food Stamps), or DSS Awards. Please provide all pages. **Note: You will not qualify if you only receive food stamps.**

Applications can be submitted in person at 136 W. Main Street, Waterbury, CT 06702, or emailed directly after ensuring sensitive information is redacted. **Incomplete applications cannot be accepted. Completed applications take 1 to 2 weeks to be processed. A letter will be emailed to the email provided.** For questions about the application process, contact Zoraida Torres at 203.754.9622 ext. 114 or email [ztorres@waterburryymca.org](mailto:ztorres@waterburryymca.org).

Together, we strengthen our community. Apply today!