



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

DISCOVERING THEIR POTENTIAL

**Youth Scholarship Program (Ages 11-17)
ASHLAND AREA YMCA**



The **ASHLAND AREA YMCA** is a Christian based, not-for-profit, health and human services organization committed to helping people reach their full potential in spirit, mind and body. We are here to serve people of all ages, backgrounds, abilities and incomes. The YMCA is community-based and believes that its programs and services should be available to everyone. That's why the ASHLAND AREA YMCA offers the scholarship program. This program offers a sliding scale that is designed to fit each individual's financial situation.

Scholarship memberships are made possible by funds from the United Way and through the generosity of our members and donors in the Building Strong Families annual fundraising campaign.

Is this a renewal? _____Yes _____No ****Please return M-F between 12-8 PM for approval****

Your Information:

Name: _____ Date: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____

Your signature

Date of birth (*Must be 11-17 years old)

Referred by: _____ Phone: _____

Please read each statement and initial:

_____ The information I am submitting is true and correct to the best of my knowledge.

_____ I understand the YMCA has the right to use other resources to verify the information I submit.

Print name: _____ Date: ____/____/____

Parent Signature: _____

Please return completed application with all documents attached to:

Ashland Area YMCA

Missy Griffith

Membership & Marketing Director

3232 Megan Neyer Way~Ashland, KY 41102

FOR OFFICE ONLY

Date application received ____/____/____ Approved ____ Denied ____

Reason for denial (if applicable) _____

Date issued ____/____/____ Renewal date ____/____/____ Mid-pid _____