



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

2010-2011 - 4 Years Old through 3rd Grade **Child - \$35/year**

2010-2011 – 4th Grade through 8th Grade **Youth - \$60/year**

2010-2011 – 9th through 12th Grade **High School - \$75/year**

MEMBERSHIP APPLICATION

(Complete and receive the member rate on youth program fees)

PLEASE PRINT

Parent's Name _____

Address _____

City _____ State _____ Zip _____

Parent's Date of Birth _____ (for security purposes to insure child is registered with correct parent)

Home Phone _____ Cell Phone _____ Work Phone _____

Child's Name _____ Male ___ Female ___ Date of Birth _____

On your child's first visit to the YMCA, they need to have their photo taken and receive their membership card at the Welcome Center desk. **This card gives the youth member access to the YMCA building. The youth member must ALWAYS have their YMCA membership card with them to enter the YMCA building. The Child member must always be accompanied by an adult.**

Parent/Guardian's Signature _____ Date _____

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MEMBERSHIP FINANCIAL ASSISTANCE REQUEST:

If you need financial assistance, please mark the appropriate section below and pay the amount marked.

My annual household income is: (Please check appropriate income)

___ Under \$20,000 per year (child membership \$13, youth membership is \$20, HS membership is \$\$28)

___ Between \$20,000 and \$50,000 per year (child membership is \$20, youth membership is \$40, HS membership is \$50)

Based on my annual income as indicated above:

Enclosed is \$ _____ for the YMCA Youth Membership

Please make check payable to the YMCA

YMCA, 230 S. Minnesota Ave., Sioux Falls, SD, 57104, Phone: 605-336-3190, Fax: 605-336-3516

www.siouxfallsymca.org