



ARMED SERVICES YMCA

MILITARY OUTREACH INITIATIVE APPLICATION YMCA MEMBERSHIPS ONLY

THIS APPLICATION IS FOR MEMBERSHIPS AT YMCA LOCATIONS ONLY

IN PARTNERSHIP WITH THE ARMED SERVICES YMCA, THE DEPARTMENT OF DEFENSE IS PROUD TO OFFER 6-MONTH GYM MEMBERSHIPS AT PARTICIPATING YMCA FACILITIES NATIONWIDE. TO QUALIFY FOR THIS PROGRAM, MILITARY MEMBERS/FAMILIES MUST MEET ELIGIBILITY CRITERIA FOR ONE OF THE PROGRAM CATEGORIES LISTED BELOW:

MEMBERSHIP ELIGIBILITY CRITERIA:

DEPLOYMENT/MOBILIZATION CATEGORIES:

CATEGORY 1: DEPLOYED GUARD/RESERVE

FOR SPOUSE/CHILD DEPENDENTS DURING DEPLOYMENT AND OR MOBILIZATION

- My spouse is currently on Title 10 Deployment/Mobilization orders issued by the Department of Defense (Army, Air Force, Marine Corps, Navy)
- My spouse's orders have AT LEAST 3 MONTHS left from today's date
- My spouse has physically relocated away from home, and is not living within commuting distance from home during his/her mobilization/deployment
- I meet all eligibility criteria listed above in this category

CATEGORY 2: RELOCATED SPOUSE

FOR SPOUSE/CHILD DEPENDENTS DURING DEPLOYMENT AND OR MOBILIZATION

- My spouse is currently on Title 10 Deployment/Mobilization orders issued by the Department of Defense (Army, Air Force, Marine Corps, Navy)
- My spouse's orders have AT LEAST 6 MONTHS left from today's date
- My family have relocated away from the military installation my spouse was deployed from
- I meet all eligibility criteria listed above in this category

INSTRUCTIONS:

DETERMINE YOUR PROGRAM CATEGORY BEFORE CONTINUING

CATEGORY 3: INDEPENDENT DUTY PERSONNEL (IDP)

FOR SERVICE MEMBERS WITHOUT ACCESS TO MILITARY GYM EQUIPMENT

- I am currently on Title 10 orders within the United States of America issued by the Department of Defense (Army, Air Force, Marine Corps, Navy)
- My Orders Have AT LEAST 6 MONTHS left from today's date
- I am currently assigned to a command/unit that is geographically isolated from any military fitness facilities and does not offer any access to free physical fitness equipment
- I am living alone and will utilize a gym membership alone, or my family resides with me and will be added to a gym membership with me
- I meet all eligibility criteria listed above in this category

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SUBMIT ALL REQUIRED PAPERWORK – NO EXCEPTIONS

SPECIAL NOTICE NEW MEMBERSHIP PAPERWORK REQUIREMENTS:

To meet the requirements for the IDP Category service members must complete the Unit Request for Independent Duty Personnel Form obtaining both authorization signatures

Signature 1: Commanding Officer or Officer in Charge of the member's unit

Signature 2: Service Branch Point of Contact via email (Page 9)

Correct completion of the IDP form is the service member's complete responsibility. Failure to complete the IDP form correctly will delay the start of the membership.

		CATEGORY		
		DEPLOYED GUARD/RESERVE	RELOCATED SPOUSE	INDEPENDENT DUTY PERSONNEL
SERVICE MEMBER/ FAMILY	SERVICE MEMBER/FAMILY ITEM 1 ELIGIBILITY FORM	✓	✓	✓
	SERVICE MEMBER/FAMILY ITEM 2 UNIT REQUEST FOR IDP			✓
LOCAL YMCA	LOCAL YMCA ITEM 1 ELIGIBILITY FORM	✓	✓	✓
	LOCAL YMCA ITEM 2 REIMBURSEMENT INVOICE	✓	✓	✓

RENEWAL MEMBERSHIP PAPERWORK REQUIREMENTS:

		CATEGORY		
		DEPLOYED GUARD/RESERVE	RELOCATED SPOUSE	INDEPENDENT DUTY PERSONNEL
SERVICE MEMBER/ FAMILY	SERVICE MEMBER/FAMILY ITEM 1 ELIGIBILITY FORM	✓	✓	✓
	SERVICE MEMBER/FAMILY ITEM 2 UNIT REQUEST FOR IDP *COPY OF ORIGINAL*			✓
	SERVICE MEMBER/FAMILY ITEM 3 RENEWAL COMMAND MEMORANDUM			✓
LOCAL YMCA	LOCAL YMCA ITEM 1 ELIGIBILITY FORM	✓	✓	✓
	LOCAL YMCA ITEM 2 REIMBURSEMENT INVOICE	✓	✓	✓
	LOCAL YMCA ITEM 3 6 MONTH ATTENDANCE RECORDS	✓	✓	✓

ATTENDANCE RECORDS AND REQUIREMENTS:

COMMAND MEMORANDUM EXAMPLES:

ALL COMMAND MEMORANDUMS MUST BE ON DEPARTMENT OF DEFENSE LETTERHEAD

RENEWAL MEMORANDUM FORMAT
(FOR RENEWAL OF INDEPENDENT DUTY PERSONNEL MEMBERSHIP):

DOD LETTERHEAD

CURRENT DATE

MEMBER, RANK IS CURRENTLY ASSIGNED TO **UNIT, ADDRESS** FROM **START DATE** TO **END DATE**. THIS MEMBER IS APPROVED AS INDEPENDENT DUTY PERSONNEL, AND IS ELIGIBLE TO RECEIVE A YMCA MEMBERSHIP THROUGH THE MILITARY OUTREACH INITIATIVE AT **YMCA LOCATION, ADDRESS.**

SIGNED, RANK, DATE

TITLE

UNIT

CLASSIFIED LOCATION MEMORANDUM FORMAT
(FOR DEPLOYMENT/MOBILIZATION):

DOD LETTERHEAD

CURRENT DATE

MEMBER, RANK IS CURRENTLY DEPLOYED/MOBILIZED FROM **START DATE** TO **END DATE**. DUE TO SECURITY REASONS, LOCATION(S) OF THIS ASSIGNMENT CANNOT BE DISCLOSED. DURING THIS TIME, SPOUSE/CHILD DEPENDENTS OF THIS MEMBER ARE ELIGIBLE TO RECEIVE A YMCA MEMBERSHIP THROUGH THE MILITARY OUTREACH INITIATIVE AT **YMCA LOCATION, ADDRESS.**

SIGNED, RANK, DATE

TITLE

UNIT

SERVICE MEMBER/FAMILY FORM 2: UNIT REQUEST FOR IDP

FAILURE TO FOLLOW INSTRUCTIONS WILL RESULT IN DELAYED/DENIED REQUESTS

NOTICE TO SERVICE MEMBERS: YOU ARE ENTIRELY RESPONSIBLE FOR THE FULL CORRECT COMPLETION OF THIS FORM.

NEW INSTRUCTIONS:

1. REVIEW NOTICE TO COMMAND
2. DETERMINE SERVICE BRANCH POINT OF CONTACT
3. COMPLETE COMMAND INFORMATION, YMCA INFORMATION, AND LIST PERSONNEL
4. OBTAIN COMMANDING OFFICER/OFFICER IN CHARGE SIGNATURE
5. OBTAIN SERVICE BRANCH POINT OF CONTACT SIGNATURE (VIA EMAIL)

RENEWAL INSTRUCTIONS:

1. ATTACH A COPY OF YOUR ORIGINAL APPROVED UNIT REQUEST FOR IDP
2. ATTACH A COMMAND MEMORANDUM STATING YOUR CONTINUED ELIGIBILITY FOR THIS PROGRAM (TEMPLATE PROVIDED ON PAGE 5)

NOTICE TO COMMAND:

FEDERAL DOD TITLE 10 ONLY:

IT IS THE COMMAND'S RESPONSIBILITY TO ENSURE ALL ELIGIBLE COMMAND MEMBERS ARE NOTIFIED ON THE FOLLOWING REQUIREMENTS FOR PARTICIPATION. FAILURE TO ADHERE TO THESE REQUIREMENTS WILL RESULT IN CANCELLATION/NON-RENEWAL OF YMCA MEMBERSHIP(S) AT THIS DUTY STATION OR FUTURE DUTY STATIONS. FAILURE BY THE COMMAND TO MAKE THIS REQUIREMENT KNOWN WILL NOT BE A BASIS FOR WAIVER CONSIDERATION AT THE TIME FOR RENEWAL.

1. MEMBERS ARE REQUIRED TO ATTEND THE YMCA FACILITY A **MINIMUM OF 8 CALENDAR DAYS** PER MONTH. IT IS THE SERVICE MEMBER'S RESPONSIBILITY TO ENSURE THEIR VISITS ARE ACCURATELY REGISTERED VIA CARD SWIPE, LOG BOOK, ETC.
2. THE UNIT REQUEST FOR IDP MUST BE COMPLETED IN ITS ENTIRETY OR IT WILL BE RETURNED TO THE COMMAND. ALL APPLICABLE INFORMATION MUST BE INCLUDED. FAILURE TO DO SO WILL RESULT IN A DELAY IN PROCESSING THIS REQUEST

RENEWAL REQUIREMENT:

1. EACH SERVICE MEMBER MUST RESUBMIT AN ELIGIBILITY FORM AND THE ORIGINAL APPROVED UNIT REQUEST FOR IDP TO THE YMCA FACILITY.

SERVICE BRANCH POINT OF CONTACTS (AS OF OCTOBER 2017):

ARMY:

Army Recruiting Command:

usarmy.knox.usarec.mbx.g1-ymca-fitness@mail.mil

Army- All Other IDP Requests:

usarmy.jbsa.imcom-hq.mbx.army-ymca@mail.mil

MARINE CORPS:

Marine Forces Reserve:

rick.martinez1@usmc.mil

Marine Corps Recruiting Command:

gilbert.macias@marines.usmc.mil

Marine Corps- Other IDP Requests:

Susan.Jones@usmc-mccs.org

AIR FORCE:

Air Force- All IDP Approvals:

laron.collins@us.af.mil
aaron.smelser@us.af.mil

NAVY:

Navy- All IDP Approvals:

usnymca@navy.mil

LOCAL YMCA FORM 1: ELIGIBILITY FORM

ALL SECTIONS MUST BE COMPLETED – NO EXCEPTIONS

SELECT ONE: NEW MEMBERSHIP RENEWAL MEMBERSHIP

IF RENEWAL, IS THIS THE SERVICE MEMBERS FIRST RENEWAL REQUEST? YES NO

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TODAY'S DATE: _____	CONTRACT NUMBER: <u>HDQMWR-08-C-0046</u>
PREPARER'S NAME & TITLE _____	CEO/ED REVIEWED AND APPROVED _____

SELECT ONE: **NEW MEMBERSHIP** **RENEWAL MEMBERSHIP**

FAMILY MEMBERSHIPS	NUMBER OF MEMBERSHIPS	NUMBER OF CHILDREN	X	MONTHLY MEMBERSHIP RATE	X 6 MONTHS	=	SUBTOTAL
DEPLOYED GUARD/RESERVE			x	\$	x 6 months	=	\$
RELOCATED SPOUSE			x	\$	x 6 months	=	\$
INDEPENDENT DUTY PERSONNEL			x	\$	x 6 months	=	\$
SINGLE ADULT MEMBERSHIPS	NUMBER OF MEMBERSHIPS	NUMBER OF CHILDREN	X	MONTHLY MEMBERSHIP RATE	X 6 MONTHS	=	SUBTOTAL
INDEPENDENT DUTY PERSONNEL			x	\$	x 6 months	=	\$
TOTAL REIMBURSEMENT:							\$

FOUR DIGIT ASSOCIATION NUMBER _____

YMCA NAME _____

MAILING ADDRESS (STREET, CITY, STATE, ZIP CODE) _____

FOR ARMED SERVICES YMCA NATIONAL HEADQUARTERS INTERNAL USE ONLY:			
TYPE OF MEMBERSHIP	SERVICE BRANCH	CHILDREN (NEW ONLY)	LAST NAMES/COUNT
Deployed Guard/Reserve	AR AF M N	AR AF M N	
Relocated Spouse	AR AF M N	AR AF M N	
Independent Duty Family	AR AF M N	AR AF M N	
Independent Duty Single	AR AF M N	NONE	