

## **Member-in-Residence Application**

New Britain-Berlin YMCA Hart House 50 High Street New Britain, CT 06051

Date of Application:	Referred by:		
Full Name:	Date of birth:		
ntact Phone: Social Security #:			
Current address:			-
Street	City	State	Au.
Previous Address:			_
Street	City	State	
Present Landlord's Name:	Phone:	How Long?	
Previous Landlord's Name:	Phone:	How Long?	
Are You Currently Employed:	YES NO If yes, name of co	mpany:	
Length of current employment:	If not employed, what is your	source of income?:	
Have you lived at this YMCA previo	ously? YES NO If YES,	, when?	
Have you ever been convicted of a	crime? If yes please specify, if not write	e N/A	
Do you have any health problems t	the YMCA should be aware of?YB	ESNO	
If yes, Please explain:		- Anna Anna Anna Anna Anna Anna Anna Ann	-
Please list at least two personal ref	ferences:		
Person #1: Name:	Address:		
Phone:	Years Known:		
Person #2: Name:	Address: _		
Phone:	Years Known:	•	
I certify that the above informa	ation is true:		
For Office Use ONLY	Sign and D	ate	
Picture Identification	Date Rec'd		
Social Security Card	Date Rec'd		
Verification of employment	Date Rec'd		
Approved:	Date	Move in Date_	