



ARMED SERVICES YMCA

MILITARY OUTREACH INITIATIVE APPLICATION PRIVATE FITNESS MEMBERSHIPS

IN PARTNERSHIP WITH THE ARMED SERVICES YMCA, THE DEPARTMENT OF DEFENSE IS PROUD TO OFFER FINANCIAL ASSISTANCE FOR 6-MONTH GYM MEMBERSHIPS AT PRIVATE FITNESS FACILITIES ACROSS THE COUNTRY. TO QUALIFY FOR THIS PROGRAM, MILITARY MEMBERS MUST MEET ELIGIBILITY CRITERIA BELOW:

MEMBERSHIP ELIGIBILITY CRITERIA:

NO FAMILY MEMBERSHIPS AUTHORIZED FOR THIS PROGRAM

INDEPENDENT DUTY PERSONNEL IS THE ONLY CATEGORY OF THE MILITARY OUTREACH INITIATIVE THAT IS ELIGIBLE FOR PRIVATE FITNESS MEMBERSHIPS. THIS MEMBERSHIP IS FOR SERVICE MEMBERS WITHOUT ACCESS TO MILITARY GYM EQUIPMENT.

INDEPENDENT DUTY PERSONNEL (IDP):

SERVICE MEMBER ONLY

- 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
- If approved, I will utilize the gym membership alone (no family members added)
- I meet all eligibility criteria listed above

INSTRUCTIONS:

ARMED SERVICES YMCA NATIONAL HEADQUARTERS CONTACT INFORMATION:

EMAIL: DODPF@ASYMCA.ORG

PHONE: 571-932-3206

**FOR MORE INFORMATION, PLEASE VISIT THE ARMED SERVICES YMCA WEBSITE:
WWW.ASYMCA.ORG/MOI**

NEW MEMBERSHIPS

STEP 1: DETERMINE ELIGIBILITY USING "MEMBER ELIGIBILITY CRITERIA" ON PAGE 1

STEP 2: COMPLETE "UNIT REQUEST INDEPENDENT DUTY PERSONNEL" FORM ON PAGE 5-6

STEP 3: SUBMIT ALL COMPLETED PAPERWORK TO THE SERVICE BRANCH POINT OF CONTACT (VIA EMAIL)

THE SERVICE BRANCH POINT OF CONTACT WILL SUBMIT APPLICATION(S) TO THE CURRENT ARMED SERVICES YMCA OUTREACH REPRESENTATIVE

RENEWAL MEMBERSHIPS

STEP 1: DETERMINE ELIGIBILITY USING "MEMBER ELIGIBILITY CRITERIA" ON PAGE 1

STEP 2: ATTACH ORIGINAL APPROVED "UNIT REQUEST FOR INDEPENDENT DUTY PERSONNEL" FORM, AND A RENEWAL COMMAND MEMORANDUM (TEMPLATE PROVIDED ON PAGE 4)

STEP 3: ATTACH QUALIFIED 6 MONTH ATTENDANCE RECORD FROM PREVIOUS MEMBERSHIP **ATTENDANCE POLICIES LOCATED ON PAGE 3 (IF ATTENDANCE DOES NOT MEET REQUIREMENTS, COMPLETE THE ATTENDANCE WAIVER APPLICATION LOCATED AT WWW.ASYMCA.ORG/MOI)**

STEP 4: SUBMIT APPLICATION TO THE ARMED SERVICES YMCA NATIONAL HEADQUARTERS VIA EMAIL

SPECIAL NOTICE TO SERVICE MEMBERS

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 5)

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.

ALL PAPERWORK MUST BE REDONE AND SUBMITTED FOR EVERY 6 MONTH MEMBERSHIP

ATTENDANCE RECORDS AND REQUIREMENTS:

READ ENTIRELY

ATTENDANCE REQUIREMENT:

MEMBERS USING THE MILITARY OUTREACH INITIATIVE PROGRAM MUST MAINTAIN AN 8 CALENDAR DAY VISIT PER MONTH REQUIREMENT FOR THE DURATION OF THE 6 MONTH MEMBERSHIP IN ORDER TO BE CONSIDERED FOR RENEWAL.

ACCEPTABLE FORMS OF ATTENDANCE:

FACILITY USE AND PROGRAM PARTICIPATION ATTENDANCE REPORTS CAN BE ELECTRONICALLY GENERATED FROM THE FACILITY'S EXISTING SOFTWARE SYSTEM. IF YOUR FACILITY DOES NOT HAVE A SOFTWARE CAPABILITY, STAFF MAY CREATE A MANUAL LOG WITH THE MEMBER'S PRINTED NAME, SIGNATURE, AND DATE OF VISIT.

HOW TO COUNT ATTENDANCE:

VISITATION IS COUNTED BY CALENDAR DAY ONLY. A VISIT IS DEFINED AS THE SERVICE MEMBER COMING TO THE FACILITY TO PARTICIPATE IN ANY ACTIVITY TRACKED MANUALLY OR ELECTRONICALLY IN ONE CALENDAR DAY. IF THE MEMBER RETURNS IN THE SAME DAY, ALL VISITS IN THAT DAY ARE COUNTED ONLY ONCE.

MULTIPLE SWIPES FROM THE SAME MEMBER ON THE SAME DAY COUNT AS 1 VISIT

JOHN SMITH	JANUARY 1, 2018
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HOW TO PUT A "HOLD" ON A MEMBERSHIP:

SPEAK WITH YOUR MEMBERSHIP DIRECTOR AT YOUR FACILITY ABOUT PLACING A HOLD ON YOUR ACCOUNT. PRIVATE FITNESS MEMBERSHIP SERVICES MAY PLACE **ONE HOLD PER MEMBERSHIP PERIOD**. NO ACTION IS NECESSARY UNTIL THE MEMBER WOULD LIKE TO RENEW THE MEMBERSHIP. AT THE TIME OF RENEWAL, **PRIVATE FITNESS MEMBER SERVICES MUST PROVIDE A FORMAL STATEMENT** (ON OFFICIAL FACILITY LETTERHEAD) STATING A HOLD WAS PLACED ON THE ACCOUNT FROM DATE - DATE. IF A HOLD IS PLACED ON THE MEMBERSHIP, **THE MEMBERSHIP MUST BE EXTENDED THE AMOUNT OF THE TIME HELD** IN ORDER TO PROVIDE A 6 MONTHS OF ATTENDANCE RECORDS FOR THE MEMBER.

EXAMPLE:

ORIGINAL MEMBERSHIP TIMEFRAME: MARCH 1, 2017 - SEPTEMBER 1, 2017

MEMBERSHIP HOLD: JUNE 1, 2017 - AUGUST 1, 2017

NEW MEMBERSHIP TIMEFRAME: MARCH 1, 2017 - NOVEMBER 1, 2017 (WITH A HOLD FROM JUNE 1, 2017 - AUGUST 1, 2017)

FAILED ATTENDANCE?

VISIT WWW.ASYMCA.ORG/YMCA-DOD-MILITARY-OUTREACH-INITIATIVE TO DOWNLOAD OUR ATTENDANCE WAIVER APPLICATION.

COMMAND MEMORANDUM EXAMPLE

INDEPENDENT DUTY PERSONNEL

ALL COMMAND MEMORANDUMS MUST BE ON OFFICIAL COMMAND LETTERHEAD

COMMAND 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 Private Fitness membership through the military outreach initiative at **PRIVATE FITNESS LOCATION, ADDRESS.**

SIGNED, RANK, DATE

TITLE

UNIT

UNIT REQUEST FOR INDEPENDENT DUTY PERSONNEL (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 MEMBERSHIP INSTRUCTIONS:

- STEP 1:** REVIEW NOTICE TO COMMAND
- STEP 2:** DETERMINE SERVICE BRANCH POINT OF CONTACT
- STEP 3:** COMPLETE COMMAND INFORMATION, PRIVATE FITNESS LOCATION INFORMATION, AND LIST PERSONNEL APPLYING FOR MEMBERSHIP
- STEP 4:** OBTAIN COMMANDING OFFICER/OFFICER IN CHARGE SIGNATURE
- STEP 5:** OBTAIN SERVICE BRANCH POINT OF CONTACT SIGNATURE (VIA EMAIL)

RENEWAL MEMBERSHIP INSTRUCTIONS:

- 1. ATTACH A COPY OF YOUR ORIGINAL APPROVED UNIT REQUEST FOR IDP WITH ATTENDANCE
- 2. ATTACH A COMMAND MEMORANDUM STATING YOUR CONTINUED ELIGIBILITY FOR THIS PROGRAM (TEMPLATE PROVIDED ON PAGE 4)

STEP 1 - 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 PRIVATE FITNESS 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 PRIVATE FITNESS FACILITY A **MINIMUM OF 8 CALENDAR DAYS** PER MONTH FOR 6 MONTHS. 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 THE ORIGINAL APPROVED UNIT REQUEST FOR INDEPENDENT DUTY PERSONNEL FORM AND A MEMORANDUM OF ELIGIBILITY FROM COMMAND.

STEP 2 - SERVICE BRANCH POINT OF CONTACTS (AS OF JANUARY 2018):

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

MILITARY OUTREACH INITIATIVE
PRIVATE FITNESS MEMBERSHIPS

UNIT REQUEST FOR IDP (INDEPENDENT DUTY PERSONNEL)

COMMAND INFORMATION:

COMMAND/UNIT NAME: _____

COMMAND/UNIT STREET ADDRESS: _____

COMMAND/UNIT CITY, STATE, ZIP CODE: _____

DUTY ADDRESS: _____

DUTY CITY, STATE, ZIP CODE: _____

COMMAND UNIT/POC: _____

COMMAND UNIT/POC 10 DIGIT PHONE NUMBER: _____

COMMAND UNIT/POC EMAIL: _____

FITNESS FACILITY INFORMATION

LOCATION NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP CODE: _____

RATE/RANK/FULL NAME OF EACH SERVICE MEMBER (ADD ADDITIONAL PAGES IF NECESSARY):

COMMANDING OFFICER / OFFICER IN CHARGE SIGNATURE:

I UNDERSTAND ONLY TITLE 10 PERSONNEL ARE ELIGIBLE AND CERTIFY THAT NO TITLE 32 PERSONNEL ARE INCLUDED IN THIS REQUEST. I CERTIFY THE ABOVE NAMED ACTIVE DUTY PERSONNEL ARE ASSIGNED TO THIS COMMAND AND WILL BE FOR A MINIMUM OF 6 MONTHS. THIS COMMAND DOES NOT PAY FOR FITNESS MEMBERSHIPS FOR OUR PERSONNEL AND THIS COMMAND DOES NOT HAVE ACCESS TO A FREE FITNESS FACILITY AT OR NEAR THIS LOCATION. I UNDERSTAND THAT EACH MEMBER MUST ATTEND THE YMCA 8 CALENDAR DAYS PER MONTH IN ORDER TO BE ELIGIBLE FOR RENEWAL IN 6 MONTHS OR FOR REINSTATEMENT AT A FOLLOW ON COMMAND, IF APPLICABLE.

SIGNATURE AND DATE: _____

PRINTED NAME/RANK: _____

TITLE: _____

EMAIL: _____

SERVICE BRANCH POINT OF CONTACT SIGNATURE:

SIGNATURE/DATE: _____

APPROVED BY