

## DOD ARMED SERVICES YMCA INITIATIVE MILITARY OUTREACH INITIATIVE



## WAIVER REQUEST

**INSTRUCTIONS:** See "Program Instructions and Requirements" for additional information.

<u>Service Member/Spouse</u> – email "Waiver Request" along with your "Membership Application" and any supporting documents (e.g., Attendance Report) to the appropriate MCAO org box/address.

- <u>Attendance Waiver</u>: Explain failure to meet mandatory minimum attendance requirement by listing dates with reason for gap in attendance (e.g. medical restriction to-from dates; TDY to-from dates).
- Eligibility Waiver: Provide explanation for applications that are not within one of the four eligible categories.

## Membership Information

Service Member (Last, First):

Rank: \_\_\_\_\_

Membership Type (Select One): Service Member Only Spouse Only Family (2+)

**Detailed Explanation** (use continuation sheet if necessary)

Member Certification:	I certify the information provided is accurate. I understand that intentionally providing false information to secure	
services under a Defense contract is cause for disciplinary action and may be prosecutable. I understand that further verification of the above		
information may be request	ed upon review.	

Signature:	_ Date:
Printed Name:	Phone:

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