



Membership Change Form

Member Name _____

Birthdate _____

Address _____

City _____

State _____

Zip _____

(_____) _____

Phone Number _____

Email _____

WHAT WOULD YOU LIKE TO CHANGE ABOUT YOUR MEMBERSHIP?— CIRCLE ONE

CANCEL This form must be filled out BEFORE THE 19TH of the month if draft is on the 1st, and BEFORE THE 12th of the month if draft is on the 15th.

Reason/s for Leaving (please check all that apply): This is a written notice.

- Lost Motivation
- Relocation
- Financial Hardship
- Summer/Snow Bird
- No Longer Using Facility
- Medical Reasons
- No Longer Doing YMCA Activities

If you're renting a locker has it been cleaned out/lock removed? Yes or No—Locker #: _____

HOLD Memberships can be on hold for 2 months, once a year. Hold will start/end around draft date.

If you pay monthly: Once the hold ends, automatic payments will resume on your original draft date.
If you pay annually: You will not receive a refund, but your membership will be extended 2 months.

Begin Hold: _____ End Hold: _____

Reason for Hold: _____

Signature: _____ Date: _____