



GREATER MISSOULA FAMILY YMCA
MEMBERSHIP CANCELLATION FORM



We build strong kids, strong families, strong communities.

In accordance with the Membership Application Agreement, regardless of how a membership is paid for, written notice must be given to the Missoula Family YMCA by the **LAST DAY** of the month to cancel a membership for the following month.

DATE: ____ / ____ / ____ **PRIMARY MEMBER'S NAME:** _____

HOME NUMBER: _____ **CELL/WORK NUMBER:** _____

TYPE OF MEMBERSHIP: *Please choose one.*

- Youth (7-18 years)
 Young Adult (19-29 years)
 Adult (30-61 years)
 Senior (62 years & older)
 Couple
 Senior Couple
 Family
 Individual w/Disability

REASON FOR CANCELLATION: *Please check all that apply.*

Dissatisfied: *Please check all that apply.*

- | | | | |
|--|---|--|------------------------------------|
| <input type="checkbox"/> Facilities | <input type="checkbox"/> Hours | <input type="checkbox"/> Location | <input type="checkbox"/> Price |
| <input type="checkbox"/> Adult Programs | <input type="checkbox"/> Child Watch/Nursery | <input type="checkbox"/> Group Fitness Classes | <input type="checkbox"/> Aquatics |
| <input type="checkbox"/> Aquacise | <input type="checkbox"/> Youth Sports | <input type="checkbox"/> Open Swim | <input type="checkbox"/> Open Gym |
| <input type="checkbox"/> Track | <input type="checkbox"/> Health & Wellness Center | <input type="checkbox"/> Teen Programs | <input type="checkbox"/> Day Camps |
| <input type="checkbox"/> Sports Camps | <input type="checkbox"/> Gymnasium | <input type="checkbox"/> Sauna | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Locker Rooms | <input type="checkbox"/> Youth Center | <input type="checkbox"/> Cleanliness | <input type="checkbox"/> Staff |
| <input type="checkbox"/> Other (please explain): _____ | | | |

Financial: *Are you aware of our financial assistance programs?*

Medical: *Are you aware of our hold policy?*

Moving: *Would you like us to look up information on the YMCA in the community you're moving to?*

Student Leaving Missoula for the Summer: *Are you aware of our hold policy?*

Switching to a Fitness Club: *Please check one.*

- Gold's Gym
 Women's Club
 The Gym II
 Peak
 Other: _____

Working Out of Town: *Are you aware of our hold policy? Are you aware of the AWAY program?*

Other: *Please explain.* _____

SIGNATURE: _____ **DATE:** ____ / ____ / ____

OFFICE USE ONLY

Date Received: ____ / ____ / ____ Date Processed in MemberST: ____ / ____ / ____ Staff Initials: _____ *Updated 8-21-09*