



MEMBERSHIP TERMINATION FORM

YMCA OF Saginaw
1915 Fordney, Saginaw, MI
P: 989-753-7721 F: 989-755-9329

Member's Name _____ Member's ID # _____ Today's Date _____

Last Draft Date _____ Debited Through _____ Savings or Checking _____ Credit Card _____

Please call Membership Staff or Building Coverage to Conduct Exit Interview

- All Memberships that lapse 30 days or more are subject to a joiner's fee upon rejoining.
- Hold Your Membership Instead of Terminating - There Are 2 Hold Options - use the change of information form instead of this termination
 - Temporary Hold for \$13 per month - 30, 60 or 90 days total 90 days maximum request per calendar year
 - Medical hold-
 - Not time limited, but requires a doctor slip upon return stating that you were required to be off during that specified time
- If you are having financial difficulties, have you considered Financial Assistance?
- Remind Member **7 days notice is required** prior to draft date for cancellation for the month.
 - Additional month's billing will incur if less than 7 days notice is given.
- Review membership discount groups to make sure appropriate termination fees are changed.

EARLY TERM FEES

- \$ _____ 1 month membership if less than 12 months membership?
- \$ _____ Are they required to repay a joiner's fee that was waived?
- \$ _____ OTHER, please explain: _____

Welcome Desk Clerk Name _____

1. Why are you leaving the YMCA?
2. Have you joined elsewhere? If so, would you mind telling us where?
3. What could we have done to keep you here?
4. What do we have to do to earn your business back?

I understand that if my account has a balance due upon termination that I will be responsible for costs incurred to collect this account. Costs may include but are not limited to collection agency fees, attorney fees, court costs, etc.

_____ Date _____
Member Signature

_____ Date _____
Membership Staff /Building Coverage

REQUEST A COPY OF SIGNED FORM FOR YOUR RECORDS