

Employee: _____

Membership Cancellation Form

In accordance with the membership application agreement, regardless of how a membership is paid for, written notice must be given to The Sanctuary Gym. Account must be brought up to current status. Key cards must be turned in and will be deactivated on DATE of cancellation.

A \$15 fee will be assessed if key card is not returned.

A 30 day notice must be given to cancel.

For 12month contracts, \$50 cancellation fee + 70% of the remaining obligation will be charged.

Name: _____ Key Tag #: _____

Current full Address: _____

Phone: _____ Email: _____

Note: cancel date must be at least 30 days after today's date

Today's Date: _____ + 30 days = Cancel Date: _____

Reason(s) for Cancellation

- A. Moving
- B. Going to School
- C. Unhappy with experience _____
- D. Other _____

Applicant Signature: _____ Date: _____

Membership Type: _____

Monthly Billing: _____

Join Date: _____

Cancel Date: _____

Membership Expire Date: _____

Time Remaining on Contract: _____

Remaining Contract Balance: _____

70% of remaining Contract Balance: _____

Cancellation Fee: _____

Key Tag Fee: _____

Cancellation Total: _____

Management Signature: _____ Date: _____