



# Union County Family YMCA Membership Change Form

Office Use Only:

Date Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Date Processed: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Membership Type: \_\_\_\_ 2 Adults + children \_\_\_\_ 1 Adult + children \_\_\_\_ Couple \_\_\_\_ Adult  
\_\_\_\_ Youth \_\_\_\_ Young Adult

### Termination Request

Per the membership handbook, I understand the YMCA requires a 30-day written notice to cancel my membership and that I will draft one more time. I also understand that I must pay any outstanding balances prior to terminating. Additionally, I understand *that I will be required to pay the joiner fee again if my membership lapses more than 90 days*. Confirmation will be sent via e-mail or phone. Annual Memberships must be held to the extent of the contract, and there are no refunds.

**Reason for Termination: (Select one)**

- Relocation/Moving
- Drop for Summer or Winter
- Monetary Problems
- Switching to another Facility
- Lack of personal time to Participate
- Medical Reasons
- Dissatisfaction with Program Offerings
- Dissatisfaction with Facility Crowding

\_\_\_\_\_  
Member's Signature (Parent if Youth)  
Date

### Hold Request

Membership may be placed on hold for a minimum of one month for reasons such as extended vacations or medical reasons. All requests must be made in writing at least 30 days prior to desired hold date and you will draft one last time within this timeframe. There is a maximum of up to 3 months or 90 days in a 12 month period. This policy is only available in a 30/60/90 day timeframe.

Reason for Hold Request: \_\_\_\_\_

\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

\_\_\_\_\_  
Member's Signature (Parent if Youth) Date

**Change Membership Type on Back of Form**



**Change Membership Type**

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

Required 30 day notice: I will draft one more time at the current rate and the change will take effect next draft.

\_\_\_\_\_  
**Member's Signature (Parent if Youth)**

\_\_\_\_\_  
**Date**

**Add/Remove Member(s) to Membership:**

Only family memberships may add members. All other memberships must upgrade to a family. Added members must live in the same household and claimed on taxes as dependents. Children may remain on membership until they turn 25. Please list all members being added to membership

**Member(s) staying on membership or being added/removed:**

**Date of Birth:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I do acknowledge the risk of injury that is possible during sports and fitness programs and I assume all risks and hazards to such participation including transportation to and from activities. I waive, release, absolve, indemnify, and agree to hold harmless the YMCA, organizers, supervisors, officers, directors, coaches, participant and referees.*

\_\_\_\_\_  
**Print Name of Self (Parent or Guardian if Minor)**

\_\_\_\_\_  
**Signature of Self (Parent or Guardian if minor)**

**Updated: 9/16/2020**