



## EFT Change/Cancelation Form

Member Name \_\_\_\_\_

Type of Membership \_\_\_\_\_ Rate \_\_\_\_\_

Names on Membership Plan \_\_\_\_\_

- I wish to cancel my automatic bank draft and or credit card transaction. I understand that I must sign this cancelation form a minimum of 15 days prior to the first calendar day of the month for cancelation. If the first calendar day of the month is before my 365 day commitment is finished, I am responsible for paying a \$25.00 early cancelation fee due upon signing this EFT cancelation form. I understand that by signing this request, all automatic transactions will stop that were provided by The Sideline Fitness Center. Early Cancelation must fall under one of the categories below in order to void the early cancelation fee.

**Circle One**

- Relocation/Moving
- Medical/Injury related

- I wish to Place a hold on my automatic bank draft and or credit card transaction for the month(s) of \_\_\_\_\_. I understand that by placing my automatic bank draft and or credit card transaction on hold I am deactivating my membership plan for the period of time written above and the draft will restart on the first day after the end date written above. I understand that by signing this request all automatic transactions will stop that were provided by The Sideline Fitness Center during this time. I understand that in order to use the facility during this/these months written above that I must pay by another means to activate my membership. I understand that by placing my automatic draft on hold I am also suspending the 365 day early cancelation policy and it will resume upon the restart of my automatic draft.

- I wish to make the following change to my automatic draft/credit card transaction: \_\_\_\_\_

\_\_\_\_\_

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_