

## Membership Change Form

Date \_\_\_\_\_ Effective Date \_\_\_\_\_ Staff \_\_\_\_\_

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

### Address/Phone Change:

New Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

### Billing Change:

Checking\_\_ Routing # \_\_\_\_\_ Acct # \_\_\_\_\_

Bank Name \_\_\_\_\_

Visa/MC\_\_ Credit Card # \_\_\_\_\_ Exp \_\_\_\_\_

### Member Type Change:

Upgrade from \_\_\_\_\_ to \_\_\_\_\_ Downgrade from \_\_\_\_\_ to \_\_\_\_\_

### Add Individual (only 2 adults over 18 per membership)

Name \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_

### Drop Individual:

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

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