

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:

(Per Section 2 of agreement- "A \$25 fee will be charged to downgrade the membership type")

Upgrade from_____ to _____ Downgrade from_____ to _____

Elite Package= \$30/person/month \$25 fee collected ☐

Add Individual (only 2 adults over 18 years old per membership)

Name_____ Sex_____ Birthdate_____

Name_____ Sex_____ Birthdate_____

Name_____ Sex_____ Birthdate_____

Name_____ Sex_____ Birthdate_____

Drop Individual:

Name_____ Name _____

Name_____ Name _____

Signature_____ Date_____