

YMCA OF GREATER SEATTLE

Leave of Absence & Cancellation Form



PRIMARY MEMBER

Legal First Name	MI	Legal Last Name
Address		Phone Number

CHANGE REQUESTED

- Special Leave of Absence** - fees apply
 \$10 per month (YGS);
 \$5 per month (Local)
 3-12 months
- Medical Leave of Absence** – no fee
 Please attach physician's note
 1-12 months
- Membership Cancellation**
 Please Note: After 30 days, join fees will be applied to any renewed memberships.

I hereby request that my membership in the YMCA of Greater Seattle be discontinued or placed on a leave of absence as indicated above. I understand that **I must give 14 days notice prior to my membership draw date in order to make any changes to my automatic withdrawal including cancellation. Failure to do so will make subsequent drafts non-refundable.** Temporary membership cards for the period remaining of the membership are available upon request. _____ (initial)

LEAVE OF ABSENCES *(Please read and sign)*

As an accommodation to our members, the YMCA has made provisions for short-term leaves of absence. Please note and initial the following:

- All Leave of Absences are effective either the 1st or the 15th of the month, depending on your withdrawal date
- For annual invoice members, the membership will be extended the same amount as the Leave of Absence. Annual invoice members must pay the \$10 monthly fee for each month they were on leave when they return. If you cancel your membership, your \$10 monthly fees will be deducted from any refunds due to you.
- At the time of request, we will collect all membership cards until the membership is reinstated
- If you have a locker and wish to keep it until you return, you will be required to pay the monthly locker dues during your leave. If you choose to terminate your locker, you must remove your belongings prior to your leave. You may select another locker upon your return.

Would you like to maintain your locker during your Leave of Absence? Yes No Not Applicable

Signature: _____ Date _____

What month do you wish to begin your leave of absence?

MEMBERSHIP CANCELLATION

We have appreciated having you as a member of the YMCA of Greater Seattle. To assist us in continually improving our programs and services, we would appreciate you taking a few moments to answer the following questions:

1. What was your primary reason for joining the YMCA of Greater Seattle?

2. If we could have done one thing to keep you as a member, what would that have been?

3. Which statement below best describes your primary reason for cancelling your membership?

- Change in personal or work schedule Personal Finances (the YMCA offers Financial Assistance)
 Injury or illness Moving from the area: _____
 Dissatisfied with programs or service, specifically: _____
 Dissatisfied with facility, specifically: _____
 Inconvenient schedule, specifically: _____
 Better price at another facility, specifically: _____

OFFICE USE: Membership Transfers

Member in Good Standing Yes No

Membership Type: _____

Join Fee Credit: _____

Last Draft Date: _____

Overall how would you rate your experience with the YMCA? Excellent Good Fair Poor

Would you consider re-joining the YMCA of Greater Seattle? Yes No

OFFICE USE ONLY

Draft Date 4th Business Day 12th Business

staff initials: _____

