## SQUAD -level change/hold/cancel Anetworks centre



## **CHANGE MEMBERSHIP OPTION**

I authorise these changes to my membership

| Name:   | Date of Birth:  | Today's date:        |
|---|---|----------------------|
|   |   |                      |
|   |   |                      |
| Please change my Squad type to:                     | Payment frequency:  |                      |
| Gold Silver Bronze                                  | Weekly F  | Fortnightly 4 Weekly |
|   |   |                      |
| PreSquad Endurance                                  |   |                      |
| New Squad price:                                    | Change membership as of (dat  | ۵)٠                  |
| new squad price.                                    | change membership as or (add  | C).                  |
|   |   |                      |
|   |   |                      |
|   |   |                      |
| PUT MEMBERSHIP ON HOLD                              | I authorise my membership to be put on hold   |                      |
| News  | D-+   | T- d-, 2- d-L-       |
| Name:   | Date of Birth:  | Today's date:        |
|   |   |                      |
|   |   |                      |
| 1). Short term Membership hold (less than 13 weeks) | 2). OR Maximum 13 week membership hold  Membership will automatically restart 13 weeks after hold date: |                      |
|   |   |                      |
| Hold membership from: Take membership off hold:     | Hold date:  | Restart date:        |
|   |   |                      |
|   |   |                      |
|   |   |                      |
| CANCEL MEMBERSHIP                                   | I authorise my membership to be cancelled   |                      |
|   |   |                      |
| Name:   | Date of Birth:  | Today's date:        |
|   |   |                      |
| Cancellation of membership effective (date):        | Reason for cancellation:  |                      |
|   |   |                      |
|   |   |                      |
|   |   |                      |
|   |   |                      |
| FOR OFFICE USE ONLY                                 |   |                      |
| Membership No: Name of reception staff: C           | hange actioned by (name):   | Date actioned:       |
|   |   |                      |

| NOTES: |  |
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