

# MEMBERSHIP TERMINATION & CHANGE REQUEST FORM

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## ❖ MEMBER INFORMATION

Please complete this form for your change/cancellation request.

**NAME (FIRST, MIDDLE, LAST):**

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**CELL:**

**WORK PHONE:**

**EMAIL:**

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**BIRTHDATE:**

MALE  FEMALE

**MEMBERSHIP TYPE:**

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**ADDRESS**

**CITY:**

**STATE:**

**ZIP:**

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I WOULD LIKE TO SUSPEND MY PAYMENTS

I WOULD LIKE TO CHANGE MY MEMBERSHIP

**WHY ARE YOU TERMINATING/CHANGING YOUR MEMBERSHIP?**

This is only temporary, I'll be back

I no longer can afford the membership

It didn't meet my needs

I found an alternative

Quality was less than expected

Other

\*If other, please specify \_\_\_\_\_

**WHAT CAN WE DO TO IMPROVE OUR MEMBERSHIP PROCESS?** \_\_\_\_\_

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