



YMCA SOUTHCOAST Membership Termination

Today's Date _____

PLEASE PRINT LEGIBLY

Member Name _____

Birth Date _____

I, _____ wish to cancel the YMCA SOUTHCOAST membership.
person responsible for membership

Please note that you will still be responsible for payment for the current month's membership cycle, regardless of the cancellation date. I further understand if I wish to rejoin, I will be considered a new member and must pay the new member joiner fee again if membership lapsed for more than 30 days.

Signature _____

Date _____

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What is your reason for termination? Please check all that apply:

- | | | |
|-------------------------------------------------|----------------------------------------------------------|-----------------------------|
| <input type="checkbox"/> Deceased | <input type="checkbox"/> Relocation | where _____ |
| <input type="checkbox"/> Do Not Use Facility | <input type="checkbox"/> Switching to another Facility | where _____ |
| <input type="checkbox"/> Drop for Summer/Winter | <input type="checkbox"/> Transferring to another Y | where _____ |
| <input type="checkbox"/> Financial Reasons | <input type="checkbox"/> Unsatisfactory Facility Service | |
| <input type="checkbox"/> Medical Reasons | <input type="checkbox"/> Other | other please indicate below |
| <input type="checkbox"/> Military | | _____ |

Unsatisfactory Facility, please explain

Unsatisfactory Service, please explain

Please provide any suggestions you may have for how we can improve the Y.

Please return this form to your local Y branch · Attn Membership Director:

- | | | | | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------|
| Dartmouth YMCA
276 Gulf Road
Dartmouth MA 02748 | Gleason Family YMCA
33 Charge Pond Road
PO Box 466
Wareham MA 02571 | Fall River YMCA
199 N Main Street
Fall River MA 02720 | Mattapoisett YMCA
38 Reservation Road
PO Box 1067
Mattapoisett MA 02739 | New Bedford YMCA
25 S Water Street
New Bedford MA 02740 | Stoico/FIRSTFED YMCA
271 Sharps Lot Road
Swansea MA 02777 |
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Office Use Only MUST always be completed

Unit # _____ Last Draft Date _____ Staff _____