



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

AKRON AREA YMCA

Membership Cancellation Form

PRIMARY MEMBER

Name	Email	
Address	Phone Number	Date of Birth

YOUR EXPERIENCE

What was your primary reason for joining the Akron Area YMCA?

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

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

Would you consider re-joining the Akron Area YMCA? Yes No

MEMBERSHIP CANCELLATION

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

- Cannot Afford/Financial:** Did you know that the Y provides help to those who qualify for financial assistance? Through our Annual Campaign, the Akron Area YMCA provides more than 3,000 families membership and program opportunities to build a healthy spirit, mind and body for all! Visit our web site to learn more about [applying for a scholarship](#).
- Did not have time:** Did you know that your membership can be used at *all* Ohio YMCAs? Maybe a Y near your home, work or school will keep you on track. You can also put your membership on-hold for up to 6 months.
- Dissatisfied (Equipment, Facility, Staff, and Schedules):** We're listening. Let us know how we can improve. We want to be better when you come back to the Y in the future.
- Health/Medical:** Did you know that we can put your membership on hold for up to 6 months with a physician's note and help you avoid a startup fee when you return?
- Joined another fitness center:** We are sorry to see you go, but happy that you are continuing to work towards a healthy lifestyle. When you want to come back to the Y, we will be here to welcome you.
- Lost motivation:** It happens. Have you taken Wellness 101? It's free and a great way to make sure that you have the tools you need for a successful time at the Y.
- Moving out of area:** Good luck with your new adventure. As YMCAs are everywhere, I can connect you with a facility near you – and, as an added bonus, ask the new location to waive your join fee.

CANCELLATION AGREEMENT

I hereby request that my membership to the Akron Area YMCA be discontinued as indicated above. I understand that I must submit this form and receive a final draft date from a staff member least 24 hours prior to my membership draft date in order to make any changes to my automatic withdraw. Members participating in payroll deduction with their employer may require up to 2 additional weeks notification. Failure to do so will make subsequent drafts non-refundable.

- I understand that startup fees will be waived if I renew my membership within 90 days but will apply to renewals after 90 days.
- I understand that my membership termination will not be final until a YMCA employee provides a Final Draft Date and Membership End Date.
- I understand that my automatic draft will not be canceled until I receive a final draft date from a staff member. If I do not submit this cancelation in-person, my cancellation may take longer to process and it is my responsibility to confirm that the form was received by YMCA staff members.

Signature	Date
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STAFF USE ONLY

Draft Day of Month
 1st 15th

Membership End Date
____/____/____

Final Draft Date
____/____/____

Unit ID

Received By	Audited By
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We're More than a place. We're a cause

www.akronymca.org

Mission: to put Christian Principles into practice through programs that build a healthy spirit mind and body for all



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
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AKRON AREA YMCA

Membership Hold Form

PRIMARY MEMBER

Name		Email	
Address		Phone Number	Date of Birth

HOLD TYPE AND LENGTH (Choose only one)

Maximum Hold is 6 Months

Standard Hold Months 1 – 3 free Months 4 – 6 \$8/mo. Paid at time of hold	<input type="checkbox"/>					
	1 Month FREE	2 Months FREE	3 Months FREE	4 Months \$8.00	5 Months \$16.00	6 Months \$24.00
Medical Hold Months 1 – 3 free *Months 4 – 6 Free w/ physician's note	<input type="checkbox"/>					
	1 Month FREE	2 Months FREE	3 Months FREE	4 Months *FREE	5 Months *FREE	6 Months *FREE

HOLD GUIDELINES

We understand that sometimes you need to take a break and we want you to come back to us when life returns to normal. By putting your membership on hold you can avoid your startup fee when you return. Keep these important guidelines in mind when putting your membership on hold.

- Holds take effect at the beginning of the next draft cycle with 15 days notice.
- Your membership dues draft will automatically resume on the date indicated.
- Annual invoice members will have their annual renewal date moved back to match the hold duration.
- While on hold, members will not have access to YMCA membership facilities.
- While on hold, program registration fees will be at the non-member rate.

HOLD AGREEMENT

I hereby request that my membership to the Akron Area YMCA be placed on hold as indicated above. I understand that I must submit this form and receive a termination date from a staff member least 15 days prior to my membership draft date in order to make any changes to my automatic withdraw. Members participating in payroll deduction with their employer may require up to 2 additional weeks notification. Failure to do so will make subsequent drafts non-refundable.

- I understand that my automatic dues draft will resume on the date indicated.
- I understand that my membership will not be put on hold until a YMCA employee provides a Hold Start Date and Draft Resume Date.
- I understand that my automatic draft will not be held until I receive a final draft date from a staff member. If I do not submit this hold form in-person, my hold may take longer to process and it is my responsibility to confirm that the form was received by YMCA staff members.

Signature

Date

STAFF USE ONLY

Draft Day of Month

1st 15th

Hold Start Date

___/___/___

Draft Resume Date

___/___/___

Unit ID

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