

Membership number: _____

1610

DIRECT DEBIT AMENDMENT/ CANCELLATION REQUEST

Membership: Cancellation Amendment

Name:

Child's name (if applicable):

Address:

.....

.....

Postcode: Tel no:

Email: Mobile:

Amendment

Amendment of: To:

Cancellation

Cancellation of:

(eg. Premier, Concession, Fit & Active etc.)

Reason for cancellation:

Please note: If you pay your membership fees monthly, you may terminate your membership by giving us no less than one month's written notice. 1610 memberships cannot be cancelled prior to the agreed contract length that you have signed for and the last payment has been made.

Signed: Date: