



# MEMBERSHIP HOLD

YMCA CASS AND CLAY COUNTIES

Staff: _____	Date: _____
Unit ID#: _____	
Membership Type: _____	
Draft Date: _____	Branch: _____

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

- Reason for Hold:**
- Seasonal
  - Medical Reasons
  - School
  - Work
  - Travel
  - Moving

- HOLD MEMBERSHIP FOR:**
- 1 Month
  - 2 Months
  - 3 Months

A \$5.00 fee will be charged on your regular draft date for each month your membership is on hold.

Deadline to submit hold request is based on your draft date:

Draft on the 1<sup>st</sup>: Submit by the 15<sup>th</sup> of the month prior

Draft on the 15<sup>th</sup>: Submit by the last day of the month prior

Your membership is paid and will remain active through:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

And will restart AUTOMATICALLY on:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Membership Holds can be placed once per calendar year for up to 3 months consecutively.

I hereby request that my membership be put on hold for the time period listed above and agree to pay \$5.00 per month for this service. I understand that I will not have facility access during that time. I also understand that my membership will automatically resume at the regular monthly rate on the date listed above.

If I wish to restart my membership early, I agree to pay a pro-rated membership fee for the dates between my re-join date and my next regular monthly draft date.

I understand that if I decide to cancel my membership, I must cancel in writing to avoid future drafts.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_