

# Kingborough Fitness Centre Membership Cancellation

## Member Details

First Name	<input type="text"/>	Surname	<input type="text"/>
Member Number	<input type="text"/>		

## Membership Cancellation Policy (Terms and Conditions p.11-12).

### Cancelling after the minimum term expires

Once the minimum term of your membership expires, you or we may cancel your membership (see 3.1).

When you cancel, you must pay us any fees you owe or we may take action to recover them.

### Giving us notice

You must give us 28 days' notice to cancel, unless you are cancelling for medical reasons (with supporting evidence). We count this period from the date of your request, this means your final debit may be a pro rata amount

To ensure your direct debit does not continue past your minimum term, you must give us notice within this term.

You cannot freeze your membership payments during the notice period.

### Cancelling without paying out your agreement

You can cancel your membership if time freeze is not suitable during the minimum term if:

- you are sick or incapacitated – you must show us a certificate from a qualified medical practitioner stating that you cannot exercise for the rest of your term.
- you are bankrupt—you must show us supporting documents.

We will not charge you an exit fee in these cases.

### Cancelling for other reasons

If you wish to cancel for any other reason and have more than 28 days left in your minimum term, you can pay out your agreement.

## Membership Cancellation

Date of Notice	<input type="text"/>	Date of Cancellation	<input type="text"/>
Number of Fortnights	<input type="text"/>		
Reason for Cancelling your Membership			
Health	<input type="checkbox"/>	Rate	<input type="checkbox"/>
Holiday	<input type="checkbox"/>	Work	<input type="checkbox"/>
Not Using Membership	<input type="checkbox"/>	Pregnancy	<input type="checkbox"/>
Other: <input type="text"/>			

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

## Office Use Only

<b>Medical Certificate Required</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<b>Medical Certificate Sighted</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Cancellation Approved</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<b>Freeze Entered on Database</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<b>Staff Member</b>	<input type="text"/>	