

Milpitas Star Aquatics and Fitness

Membership FREEZE and CANCELLATION Form Mem ID : _____

Please submit this form to the front desk or email it to info@msta-swim.com with an attached scanned copy of the completed form **before the deadline date (the 25th of before your last month)**. Members who pay current and last month at the enrollment must submit the cancellation form by the 25th stop the membership after one more month. If the form is submitted by the 25th, any requested changes will be made for the following month starting on the 1st. Keep in mind that any changes to an account can ONLY be done by the main member on the account. If you have any questions, feel free to call our front desk at 408-942-8889.

Main member name:	Email :
Member address:	Phone #:

<p>FREEZE: Freeze charge will be \$5/member/month</p> <p>Starting Month (1st of month): _____</p> <p>Ending Month (Last date of month): _____</p> <p>If not freezing whole account, which member(s)?: _____</p>	<p><input type="checkbox"/> Freeze Fee \$ _____</p> <p><input type="checkbox"/> Account Frozen</p>
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<p>CANCELLATIONS: (Keep in mind that this cancellation will be applicable to the entire account)</p> <p>Membership: GOLD PLATINUM AQUA-GOLD AQUA-PLATINUM</p> <p>Membership Type: MONTHLY 6-MONTH ANNUAL</p> <p>Number of people on the account: _____</p> <p>Last month of payment: _____</p> <p>Last Month of membership: _____</p>	<p>Last Month? ___ Yes ___ No</p> <p><input type="checkbox"/> Override Expiry</p> <p><input type="checkbox"/> Last Month Applied</p> <p><input type="checkbox"/> Clear Payment Info</p> <p><input type="checkbox"/> DD Payment Override</p>
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<p>Additional Information / Reason</p>	<p><i>Do not write in (Office use only):</i></p> <p>Mem Exp/Freeze Per:</p> <p><input type="checkbox"/> Email Sent</p> <p>Date & Initial:</p>
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SIGNATURE: _____ **DATE:** _____

FRONT DESK: _____ **MADE COPY:**