

## CANCELLATION REQUEST

Monthly Debit   
Term

Membership / Program Number   
Membership / Program Type

### Member / Student Details

First Name	<input style="width: 95%;" type="text"/>	Last Name	<input style="width: 95%;" type="text"/>
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr	Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/>
Address	<input style="width: 95%;" type="text"/>		
	Suburb	Postcode	
Telephone	Home	Work	Mobile
Email	<input style="width: 95%;" type="text"/>		

**Thank-you for your patronage!**

What facilities/ programs have you been using?

Is your health and fitness still important to you?  Yes  No

Would you consider re-joining in the future, circumstances permitting?  Yes  No

How would you rate our service in the following areas?

Facilities & Programs on offer	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Customer Service & Staff	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Cleanliness & Presentation	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor
Equipment & Availability	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor

What is the prime reason/s for cancelling your membership?

  
  
  


Term Membership  Y  N Member responsible for family:  M'ship No.

Last direct debit date  /  /  Last day of membership date  /  /

Member's / Account Holder Signature  Date  /  /

Staff Name

Staff Use Only

**PRIVACY** The YMCA acknowledges and respects the privacy of individuals. The information that is being collected on this document is for the purposes of processing your membership or enrolment and financial institution payments if applicable. The YMCA, its authorised staff and contracted service providers such as financial institutions and Government agencies covered by law, maybe recipients of this information. By joining or enrolling in a program at the local Centre you have also become a member of the YMCA. You will receive communications from the YMCA from time to time to update you on items relating to your membership. The YMCA uses a range of mediums to communicate with its members including, but not exclusive to, direct mail, email, SMS and telephone. If you do not wish to have your information contained in this document used or disclosed for this purpose the YMCA will be unable to process your membership or enrolment. You have the right to access and alter personal information protecting yourself in accordance with the Commonwealth Privacy Act (Amended 2001). Full details of the YMCA Privacy Policy can be obtained on request at the Centre or on line at [www.geelong.ymca.org.au](http://www.geelong.ymca.org.au)