



GOLDEN CORRIDOR FAMILY YMCA MEMBERSHIP CANCELLATION



SELECT BRANCH: ___ Campanelli ___ Taylor

Member Name (Please Print Clearly): _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

I would like to cancel my membership for the following reasons:

- Moving (02)
- Illness (03)
- Dissatisfied with Facility (04)
- Joined Another Club (05)
- Can't Find Time (06)
- Financial Reasons (07)
- Dissatisfied with Programs (08)
- Drop for Summer/Winter (09)
- Leaving for School (10)
- Lost Motivation (11)
- Other (12) / Please Specify Reason: _____

Please help us improve our service by completing this brief survey:

	Excellent	Good	Average	Fair	Poor
Cleanliness of Facility	5	4	3	2	1
Friendliness of Staff	5	4	3	2	1
Quality of Programs	5	4	3	2	1

- Do you feel well informed on all activities available to you at the YMCA? Yes No
- Do you feel we helped you reach your fitness goals? Yes No
- If no, did you discuss your goals with a staff member? Yes No
- Would you recommend the Y to a friend, co-worker, or relative? Yes No
- Is there anything we can do to help you remain a satisfied member? _____

I am requesting that the Golden Corridor Family YMCA discontinue my membership. I understand this form will serve as my 15 day written notice needed to CANCEL my membership draft. I also certify that I have received a copy of this form.

FINAL DRAFT DATE: _____

MEMBER SIGNATURE: _____

Staff Name: _____ Date: _____