

Section 1: Members Details

Member name:

Parent/Guardian (if app is U18 years old):

Mobile:

Section 2: Change of Debit

Current Membership:

Payment: \$

New Details:

Payment: \$

Date on which to first debit the new amount:

Section 3: Suspension Request

Suspend Membership From:

to:

(Please see centres terms and conditions for suspension conditions)

Reason for Suspension:

Section 4: Cancellation Request

Last direct debit is:

Last day of gym/pool access is:

(Please see centres terms and conditions for cancellation conditions)

Reason for Cancellation:

(Please tick one option)

- | | |
|--|---|
| <input type="checkbox"/> No time – personal/work/study | <input type="checkbox"/> Inconvenient location – moved suburb/state/international |
| <input type="checkbox"/> Joined another gym | <input type="checkbox"/> Extended leave – holiday/placement |
| <input type="checkbox"/> Not using enough | <input type="checkbox"/> Opening hours do not suit |
| <input type="checkbox"/> No longer a UniSA student/staff | <input type="checkbox"/> Poor cleanliness/Equipment not working |
| <input type="checkbox"/> Financial reasons | <input type="checkbox"/> Poor customer service |
| <input type="checkbox"/> Crowding/wait times | <input type="checkbox"/> Contract/membership terms |
| <input type="checkbox"/> Lifestyle change | |
| <input type="checkbox"/> Other _____ | |

Section 5: Acknowledgement

Signature of Member:

Date:

Parent/Guardian:

Date:

University Representative:

Initials:

Date

OFFICE USE ONLY - POS MEMBERSHIP NUMBER: