



MEMBERSHIP TERMINATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Membership ID Number (Barcode # back of the Key Tag): \_\_\_\_\_

Reason for Cancellation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete this form and drop it off at the Fitness Center where the membership was initiated or email it to us at [sales@fitness-nation.net](mailto:sales@fitness-nation.net).

Membership Termination Form MUST be received on the last day of the month by 12:00 PM to avoid the Monthly Dues/Annual Fees being charged on the 1st of the month.