

**Franklin County Family YMCA
MEMBERSHIP CHANGE FORM**

In order to change membership please complete this form submit at the Member Service Desk

Member's Full Name _____ Birth Date _____

Type of current membership: Family of 3 Family of 2 Adult Individual Youth

Indicate your membership payment method:

Annual Semi-Annual Bank Debit Card Card/Debit Card Corp Payroll Deduct Monthly

I want to remove the following family members. Confirm payment method. I understand that if I "downgrade" my membership and want to upgrade it at a later date, I must pay appropriate joining and membership fees.

I want to add the following family members: List name(s) and dates of birth (attach additional page if needed)

_____ Date of Birth _____

_____ Date of Birth _____

Add Locker # _____ **Delete Locker #** _____ (STAFF: Initial here that you have recorded this on Master Lock List _____)

Change Bank or Credit Card/Debit Card Information – requires an updated and signed form.

- I understand if my payment is bank debited on the 1st of the month, changes must be submitted by the 15th of the previous month.
- I understand if my payment is bank debited on the 15th of the month, changes must be submitted by the 1st day of that month.

Change Payment Method - From _____ **To** _____

Please make following change to my record:

• New Address _____

• New Phone Number _____

Member Signature _____ **Date** _____

YMCA Staff Name _____ **Date** _____

STAFF : Please complete this form while the member is at the Front Desk.

Debit date is 1st 15th I advised member that change will take effect on _____ .

Last debit/credit will be on _____ .

Please complete before members leaves Member Service Desk

- 1) Pull membership record up on Trinexum and make appropriate change. Initial and date this form.
- 2) If there were changes to be made on Bank Debit Authorization or Corporate Payroll Deduct forms I have had the member complete a new form and attached it.
- 3) Place this completed and signed form with your shift report.
- 4) If a payment for upgrade was made, I have followed routine receipting steps. The amounts due for upgrading (difference between previous rate and new rate are):

\$ _____ Joiner Fee Due \$ _____ Membership Fee Due \$ _____ Locker Fee

Staff Name _____ Date _____

Member Service Staff Use:

Date Processed _____ By _____

Bank Draft Changed : Date _____ By _____

Changed : Trinexum _____

Notes _____
