

# 30 Day SFHC-Fitness Center Cancellation / Suspension Form

As of \_\_\_\_\_, I, \_\_\_\_\_, am giving 30 day notice  
TODAY'S DATE PRIMARY MEMBER NAME  
of \_\_\_\_ cancellation (or) \_\_\_\_ suspension of my fitness membership.

- 1) Current Month                      \$\_\_\_\_\_                      (Has this month been paid?)  
2) Final Month                        \$\_\_\_\_\_                      (Is next month more than 30 days away?)  
3) Outstanding Fees                    \$\_\_\_\_\_                      (Any late fees owed?)

**Closing Balance**                      =                      \$\_\_\_\_\_

**Paid by:**    \_\_\_\_\_ **Cash/Check**  
                  \_\_\_\_\_ **Card on file**  
                  \_\_\_\_\_ **Automatic Scheduled Pymt**

**If suspending [card(s) still need to be returned]:**  
I would like my recurring card charge to re-start on the 5<sup>th</sup> of \_\_\_\_\_.

I returned \_\_\_\_\_ cards on \_\_\_\_\_. (To be filled out at end of 30 days.)  
DATE

\_\_\_\_\_  
Signature of Primary Member

\_\_\_\_\_  
Date