



FOR YOUTH DEVELOPMENT™
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

MEMBERSHIP HOLD FORM

GREATER NAPLES YMCA

Today's Date: _____

The Greater Naples YMCA allows members to place their membership on hold up to 9 months in a calendar year. Holds require a 30-day notice and, will release on the same day of the month 1-9 months from the start date.

Primary Member

Name _____ D.O.B. _____

Address: _____

City: _____ State: _____ ZIP: _____

Preferred Phone Number: _____ E-mail address: _____

Email is required to place membership on hold

Length of Hold (Please circle one): **1** Month **2** Months **3** Months **4** Months **5** Months **6** Months **7** Months **8** Months **9** Months

Date leaving: _____ **Date returning:** _____ (must be done in 30day increments)

For example: Date leaving: May 7th Date returning: June 7th

TERMS OF MEMBERSHIP HOLD: Please read and initial next to each statement.

_____ I understand that my membership will be **AUTOMATICALLY REINSTATED** at the end of my membership hold and membership payments will **AUTOMATICALLY RESUME** based on the payment method used at the time the membership hold is started.

_____ I understand that memberships may be put on hold for a minimum of 1 month, maximum of 9 months (exceptions may be made for medical reasons), without having to pay membership dues.

_____ I understand that I may not use the YMCA facilities or receive any program discounts while my membership is on hold.

_____ I understand that I may reactivate my membership at any time within the nine (9) month period and will be responsible for paying prorated dues in order to resume use of the YMCA facilities and programs.

_____ I understand that if I do not wish to resume using my membership I must complete a Membership Cancellation Form in order to terminate any further dues from being accrued on my membership account.

I agree to the terms of the Greater Naples YMCA's Membership Hold.

X _____ **Date:** ____/____/____

Primary Member Signature (Type name if completing online)

Office Use Only

Hold Start Date: _____ Day of _____, 20____ **Hold End Date:** _____ Day of _____, 20____

Hold Membership without Dues until _____, 20____ **Next Process on:** ____/01/____ (Member Info Screen)

Staff signature

Date

GREATER NAPLES YMCA

5450 YMCA Rd, Naples, FL 34109 P 239 597 3148 W greaternaplesymca.org