

**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 \_\_\_\_\_

\_\_\_\_\_