We're sorry to see you go

Member Name: _____ D.O.B: _____

PCYC Member No: _____ Phone: _____

GYM & FITNESS MEMBERSHIP

☐ PCYC NSW has a 30 day Direct Debit cancellation policy,I hereby agree to cancel my Gym + Fitness Membership Direct Debit. I understand that this will result in the inability to use the gym and that my current PCYC Club Membership can still be used for other services offered by the club after the 30 day cancellation period has expired.

GYMNASTICS CLASSES

Cancel Specific Class/es ☐ Cancel All Classes ☐

If cancelling a specific class/es:

CLASS NAME: _____ CLASS DAY AND TIME:_____

PCYC NSW has a 30 day Direct Debit cancellation policy,I hereby agree to cancel the above Direct Debit. I understand that cancelling my direct debit payments results in the inability to participate in my class/es after the **30 day** cancellation period has expired.

Date of Cancellation:
(Date this form is being submitted)

Date of Final Class:
(30 Days after cancellation request)

REASON (S) FOR CANCELLATION - your honesty and feedback is appreciated:

Moving away/ Relocation ☐ Dissatisfied with Facility ☐

Work Schedule Changes ☐ Other - please specify below ☐

_____

_____

I, _____, declare that I understand and agree to the terms and conditions of Direct Debit cancellations at PCYC NSW. I wish to terminate as per the terms and conditions of PCYC NSW.

_____ _____ _____

Signature Date Staff Signature

PCYC NSW LTD | T (02) 9625 9111 | ABN 89 401 152 271
Level 2/6 Figtree Dr, Sydney Olympic Park NSW 2127

_____

Date Processed