

Cancellation Request Form

Step One - Print and complete.

Step Two - Please return this form personally to Flex Appeal in order to complete cancellation.

Name _____ Member # _____

Address _____

Phone _____ Email _____

Requested date of cancellation. Please select one.

- Immediately. Your 30 day notice will begin when the club receives notice and payment (if applicable).
- Other _____

If you have not completed your membership obligation, which option do you prefer to pay the \$150 early cancellation fee?

- Does not apply. I am past my obligation date.
- Charge my billing information on file.
- I have enclosed a check.
- Bill my credit card # _____ exp. _____
- Wait until the contract is complete (monthly charges will continue).

Reason for cancel _____

On a scale of 1-10 (10 being great), how would you rate the club? _____

Comments:

Member Signature _____