



Gold Membership Transfer Request Form

Primary Name on Membership: _____

Members you would like added or removed from membership:

_____	_____	_____	_____	_____	_____
Name	Age	DOB	Name	Age	DOB
_____	_____	_____	_____	_____	_____
Name	Age	DOB	Name	Age	DOB
_____	_____	_____	_____	_____	_____
Name	Age	DOB	Name	Age	DOB

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Current Membership Type: Family Couple Individual Senior Charter

New Membership Type: Family Couple Individual Senior Silver Sneakers

Effective Date of Transfer: _____

Reason: _____

I understand if I am upgrading my membership type to a more expensive plan I will owe the prorated difference between the two memberships at the time of the request. I also understand if I am downgrading my membership type to a less expensive plan I can either have a prorated credit placed on my household for the difference or request to have a check mailed to me within 10 days after the effective date of the change.

Signature: _____ Date: _____

For Office Use Only:

Upgrading: Amount Due _____ **Downgrading:** Apply Credit to H/H _____ Issue Refund Check _____

Date Changes Made: _____ Entered By: _____