



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Westport Weston Family Y Membership Department

Membership on Hold Form

Primary Member Name: _____ Date: _____

Phone #: _____ E-Mail: _____

Hold Request Start Date: _____ **Hold Request End Date:** _____

Westport Weston Family Y Membership may be placed on hold for 3 consecutive calendar months or 3 individual months per calendar year. Please select the month(s) you wish to place your membership on hold:

Jan _____ Feb _____ March _____ April _____ May _____ June _____

July _____ Aug _____ Sept _____ Oct _____ Nov _____ Dec _____

Membership on Hold Policy

I am placing my membership to the Westport Weston Family Y on hold for the duration indicated above and agree to the following:

1. My membership will be placed on hold from the requested hold start date through the requested hold end date.
2. By placing my membership on hold I will not be subject to the join fee when my membership reactivates following the requested on-hold period.
3. Upon completion of the Membership on Hold period my automatic monthly draft will resume.
4. Should I end up requiring more than the 3-month per calendar year Membership on Hold allowance I understand I will be subject to paying the join fee upon reactivation of my membership account.

Member Signature: _____ **Date:** _____

For Office Use Only

Unit #: _____

Staff Completing Form: _____ Date: _____

Membership has been put on hold in Daxko: _____

Please submit to Membership Director when completed

Membership Director Signature: _____ Date: _____