



# Membership Cancellation Form

Member Name: _____	Member Phone #: ( _____ ) _____ - _____
Date of birth ____/____/____	
Staff Signature: _____	Date: ____/____/____

## Cancellation Checklist:

Returned I.D. \_\_\_\_\_ Account Balance is paid in full \_\_\_\_\_

Payment Method: Bank Withdrawal \_\_\_\_\_ PDC \_\_\_\_\_ Cash \_\_\_\_\_

*If paying by PDC or Bank Withdrawal, have a new payment form filled out listing all family members that are to remain active members, or write cancel if no members are to remain.*

- \_\_\_\_\_ Month last deduction will be taken out \_\_\_\_\_.(current month)
- \_\_\_\_\_ Cancellation Reason: (record in member’s own words) \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_ Did the member have any dislikes at the Rec Center? \_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_ Is the member canceling due to a lay-off or RIF at Collins? Yes No

*If yes: Let them know they are eligible to rejoin as long as they are receiving benefits from Collins Aerospace or have another avenue of eligibility through a Collins Aerospace retiree or employee.*

All members with an avenue of eligibility through a Collins Aerospace retiree or employee are invited to rejoin the Rec Center. *Please go over the following guidelines and have member initial applicable items.*

1. \_\_\_\_\_ If you are not a Collins Aerospace Employee and rejoin within a 12-month period you must pay either, back dues to your date of separation or \$95 (the lesser amount).
2. \_\_\_\_\_ If you have been gone for over 12 months, no back dues are owed, but an enrollment fee is due at sign-up and you must still have an avenue of eligibility.
3. \_\_\_\_\_ If you are a Collins Aerospace Employee you may take advantage of our Flex Fit Membership (for employees only) and rejoin within one year with an administrative fee. If you have been gone for over 12-months the enrollment fee is due at sign up.
4. \_\_\_\_\_ I agree to examine my statements of payment method with “reasonable promptness.” If I should discover (or reasonably should have discovered) any unauthorized signatures or alterations, or notice that an authorized change was not administered, I will promptly notify you of the relevant facts. I further agree that if I fail to report any errors in my account within 60 days of when a statement was made available to me, I cannot assert a claim against the Rec Center on any items in that statement, and as between the Rec Center and myself the loss will be entirely mine.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_