



MISSOULA FAMILY YMCA

SWIM TEAM CANCELLATION FORM

*We build strong kids, strong families, strong communities.*

In accordance with the Program Application Agreement, regardless of how a program is paid for, written notice must be given to the Missoula Family YMCA by the ***LAST DAY*** of the month to cancel a program registration for the following month.

**DATE:**\_\_\_\_/\_\_\_\_/\_\_\_\_ **PRIMARY MEMBER NAME:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROGRAM PARTICIPANTS NAME:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MONTH(S) YOU WANT TO BE CANCELLED OUT OF:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**HOME NUMBER:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CELL/WORK NUMBER:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TYPE OF PROGRAM:** *Please choose one.*

□Pre-Comp (Tiger Sharks) □Intermediate Ages 6-8 (Megamouth Sharks)

□Intermediate Ages 9 & 10 ( Hammerhead Sharks) □Advanced Ages 11 – 14 ( Great White Sharks)

□Senior Ages 15-21 (Mako Sharks)

**REASON FOR CANCELLATION:** *Please check all that apply.*

□Dissatisfied: *Please check all that apply.*

 □Facilities □Location

 □Child Watch/Nursery Hours □Pool

 □Open Swim □Hours

 □Sauna □Price

□Locker Rooms □Cleanliness

□Staff

□Other (please explain):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□Financial: *Are you aware of our financial assistance programs?*

□Medical: *Are you aware of our hold policy?*

□Moving: *Would you like us to look up information on the YMCA in the community you’re moving to?*

□Student Leaving Missoula for the Summer/Working Out of Town: *Are you aware of our hold policy?*

□Other: *Please explain.*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:**\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

**OFFICE USE ONLY**

 Date Received:\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Date Processed in MemberST:\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Staff Initials:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Updated 12-21-10*