

Change in Billing/Leave of Absence Form

Bainbridge Aquatic Masters (BAM)



BAM members who enroll in the installment billing plan or are members of the team paying monthly dues have the following options that may be requested on this form to modify their billing and membership status with the finance office.

1. **Temporary Break:** I am a swimmer in need of a single to several months leave. Requests are only available in full month increments and are based on the calendar month.
2. **Change in Training Level:** I am a swimmer who would like to change the number of practices I swim a week (increase or decrease). Requests are only available in full month increments and are based on the calendar month.
3. **Leaving the Team:** I am a swimmer who is leaving the team and does not have any intent to restart their membership or needs a leave longer than a few months. Requests are only available based on the calendar month.
4. **Medical Leave:** I am a swimmer who has a medical emergency or constraint requiring an absence from the team. A doctor's note is required with this request. Billing exceptions for partial month billing will be considered with a doctor's note.

All request require this form to be received by the 25th of the month preceding the requested change either at the Aquatic Center front desk or via email to terrybugas@biparks.org.

Example: If you are requesting to change your billing level for June, this form must be completed and submitted by May 25th.

Name of Swimmer _____

Current Swim Level _____

Date of Requested
Change _____

Date of Return if
Applicable _____

Notes: _____

Signature of Swimmer: _____

Date: _____

For Office Use Only

Date Form Received: _____
Amount of Next
Statement _____

Staff Members Initials: _____

Date Processed: _____

Staff Members Initials: _____

