

SRSRC Membership Cancellation Request

To Be Completed by SRSRC Staff:

Member#: _____ Name: _____

Date cancellation effective: _____

Current Account Balance: \$_____

Member informed of balance due? Y/N (please circle)

Balance due paid in full: \$_____

Staff Initials: _____

To Be completed by Member:**To Be completed by Member:**

I, _____, would like to cancel my membership at the Scripps Ranch Swim and Racquet Club effective _____.

I understand that:

- * The balance due on my account must be paid in full before the membership can be cancelled.
- * Monthly dues will continue to accrue until the account balance is paid in full.
- * There will be no special accommodations to rejoin in the future, including reduced/discounted initiation fees.

Member Signature: _____

Date: _____

Contact phone: _____

Email: _____

Address: _____