

Membership Cancellation Form

Please read the Cancellation Policy before filling out the form in its entirety.



1. Cancellation Policy

- Memberships are non-refundable unless cancelled within three days of purchase.
- Cancellation during the initial one year contract will only be permitted in cases of physician verified illness and/or a move out of a 50 mile radius of UC; a \$50 service charge will apply to all early cancellations. **PLEASE NOTE: Cancellations within the one year contract will not be processed until written documentation from your doctor and/or proof of relocation is provided in addition to the \$50 service charge.**
- If family members wish to continue membership, one family member will become the primary member and will be charged accordingly.
- Monthly deductions will continue past the 12th month unless Campus Recreation is notified in writing by the **15th of the month prior to the desired cancellation month**. If still under contract, cancellation will not be processed unless proper cancellation fee and documentation are received by the 15th of the month prior to the desired cancellation month.

2. Current Date

3. Membership Information

Name	<input type="text"/>	Member Number	<input type="text"/>
Spouse/Domestic Partner	<input type="text"/>	Legal Dependent(s)	<input type="text"/>
Address	<input type="text"/>	City/State/Zip	<input type="text"/>
Email*	<input type="text"/>	Phone Number	<input type="text"/>

*Please note that all cancellations will be confirmed via email, if you do not receive an email, please contact Member Services.

4. Parking

Members who cancel before the parking permit expires are required to return the permit to Campus Recreation. This can be done by taking the permit to a drop box located on the north side of University Avenue Level 1 parking (gated entrance) or the west side of Eden Garage (gated entrance). **Individuals who do not return the permit will be charged the outstanding balance. If the permit is returned after the balance is charged, a refund will be issued from the day it is returned through the expiration date.**

5. Desired Date of Cancellation

- If before the 15th of the month - the end of this month.
- If after the 15th of the month - the end of the next billing month.

6. Reason for Cancellation

☐ Non-Usage ☐ Relocation ☐ Financial ☐ Medical ☐ Other:

7. Please provide feedback on your experience with Campus Recreation

8. Member Signature Required

Member Signature	<input type="text"/>	Date	<input type="text"/>
------------------	----------------------	------	----------------------

9. Attach Proper Documentation (if under initial one year contract, see #1) and Return

Email to:
emilie.saltz@uc.edu

OR

Fax to:
513-556-0601

OR

Give to:
The Member Services
desk at the CRC or FCCC

OR

Mail To:
Campus Recreation
University of Cincinnati
2820 Bearcat Way
Cincinnati, OH 45221-0017

For Office Use Only

Member Services Representative (print)	<input type="text"/>	Date Received	<input type="text"/>
Final Bill Month	<input type="text"/>	Processed By	<input type="text"/>
		Date	<input type="text"/>
		Confirmation Email Date	<input type="text"/>