

Belmont Oasis Leisure Centre

Member Cancellation Form



Membership number:			
Name:			
Address:			
Suburb & post code:			
Email:			
Date of birth:			
Requested date of cancellation*:			
Main reason for cancellation:	<input type="checkbox"/> Relocation	<input type="checkbox"/> No Time/Not Motivated	
	<input type="checkbox"/> Financial Reasons	<input type="checkbox"/> Joined another Facility	
	<input type="checkbox"/> Other:		
Member sign & date:			

*Cancellation notice periods may be up to 30 days depending on your contract terms. Any payments taken during this time are non-refundable. Notice period commences when the form is received by the facility, please retain a copy of your cancellation form and any email correspondence for your records. Further documentation may be required. It is your responsibility to provide all required information. Cancellation requests will not be processed until all the information is received.

Thank you for patronage at Belmont Oasis. You will receive an email when your request has been processed. If you do not receive a confirmation within 14 days please contact the facility on 08 9277 1622.

Office use only:

Received by (staff name):			
Date form received:			
Member card returned:			
D.S. reference number:			
Facility access until:			
Final debit date:			
Reason:	<input type="checkbox"/> Fac. Req.	<input type="checkbox"/> Spec. Cond.	<input type="checkbox"/> E.O Term
	<input type="checkbox"/> Cool. Off	<input type="checkbox"/> Other:	
Processed by (staff name):			
Date processed:			