



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

River Valley Regional YMCA MEMBERSHIP ON-HOLD AGREEMENT

PERSONAL INFORMATION PLEASE PRINT

Date _____

Member Name _____ Member ID _____

Address _____ City _____ State _____ Zip _____

Email _____ Branch _____

Reason for Request _____

This form will serve as a notice to the River Valley Regional YMCA that I wish to place my membership on hold and am aware of all the policies listed below. While my membership is on hold, all YMCA privileges will be temporarily suspended and no dues will be drafted from my account during this period. Automatic billing will resume at the end of my hold date as stated on this form.

- A membership hold will be granted for a maximum of three (3) consecutive months. If additional months are needed at the end of the three (3) Months, you must contact your Branch's Member Service Department five (5) business days prior to billing month.
- Request for membership on-hold and must be done five (5) business days prior to billing month.
- A membership can only be placed on hold twice per calendar year (3 month holds cannot be combined into a 6 month hold); requests to be placed more than twice per calendar year must be approved by your home Branch's Executive Director.

On Hold Start Date Requested _____

Number of Months Requested _____

Member Signature _____ Date _____

Staff Signature _____ Date _____

OFFICE USE

Membership ID _____ Draft Day: 1 / 15

Membership will be on hold from _____ Through _____
(MM/DD/YYYY) (MM/DD/YYYY)

Membership & Billing will resume on _____, _____, _____
(Month) (Day) (Year)

Date Received _____ Date entered into Daxko _____ Staff Initials _____