



BROOKVILLE YMCA BANK DRAFT AND CREDIT CARD CANCELLATION
FORM

I _____ would like to have my

_____ Bank draft Membership

_____ Credit Card Auto Pay Membership

at the Brookville YMCA cancelled. According to the original agreement signed at the time of purchase, the bank draft or credit card auto pay membership it will be stopped **thirty (30) days from this date**. I also understand that I am to surrender my membership(s) card(s) at this date.

Date: _____

Signed: _____

Please list additional family members with the membership below.

1. _____

2. _____

3. _____

4. _____

5. _____

Last date the account will be drafted: _____

Service Desk Signature: _____