



# Membership Hold

Today's Date: \_\_\_\_\_

Applicant's last name	MI	First	Type of Membership	Home phone
Member's signature			Wild River Fitness representative (not valid without signature)	

### Family Membership:

Please list family members:

1. \_\_\_\_\_ 24 Hour Access Key Number\_\_\_\_\_
2. \_\_\_\_\_ 24 Hour Access Key Number\_\_\_\_\_
3. \_\_\_\_\_ 24 Hour Access Key Number\_\_\_\_\_
4. \_\_\_\_\_ 24 Hour Access Key Number\_\_\_\_\_
5. \_\_\_\_\_ 24 Hour Access Key Number\_\_\_\_\_

What day of the month does Wild River Fitness charge your account?

- 1<sup>st</sup> of the Month     15<sup>th</sup> of the Month     Paid in Full

Do you understand that your account will be charged \$10.00 a month and your contract will be extended the length of time you wish to be on hold? (Maximum 6 Months)

- Yes     No (Please see an employee)

Do you understand that it is your responsibility to request that your 24 Hour Access Key be reactivated at the end of the hold?

- Yes     No (Please see an employee)

Hold Beginning Date:\_\_\_\_\_ Hold Ending Date:\_\_\_\_\_

Why are you holding your membership at Wild River Fitness?

- Time Restraints
- Travel
- Medical
- Other/Comments: \_\_\_\_\_

Thank you for your time spent at Wild River Fitness, we hope to see you back in the near future!