



Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email \_\_\_\_\_

**REASON FOR FREEZE:**

- Seasonal
- Medical Reasons
- Financial
- Other

**FREEZE MEMBERSHIP FOR:**

- 1 Month
- 2 Months
- 3 Months

A \$5.00 fee will be charged on your regular draft date for each month your membership is on freeze.

Deadline to submit freeze request: 25th of the month prior to the freeze beginning.

Your membership is paid and will remain active through: \_\_\_\_/\_\_\_\_/\_\_\_\_

And will restart AUTOMATICALLY on: \_\_\_\_/\_\_\_\_/\_\_\_\_

Membership Freeze can be placed 3 months per calendar year. Months do not need to run consecutively.

I hereby request that my membership be put on freeze for the time period listed above and agree to pay \$5.00 per month for this service. I understand that I will not have facility access during that time. I also understand that my membership will automatically resume at the regular monthly rate on the date listed above.

If I wish to restart my membership early, I agree to pay a pro-rated membership fee for the dates between my rejoin date and my next regular monthly draft date.

I understand that if I decide to cancel my membership, I must cancel in writing to avoid future drafts.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff: _____	Date: _____
Branch Location: _____	
Membership Type: _____	

**YMCA of the Northern Sky**  
 Fercho | 400 1st Ave S | Fargo ND, 58103  
 Schlossman | 4243 19th Ave S | Fargo ND, 58103  
 Fergus Falls | 1164 N Friberg Ave | Fergus Falls, MN 56537