

CITY OF EDMONTON SPORTS AND FITNESS CENTRE

Continuous Monthly Membership

PRE-AUTHORIZED DEBIT CANCELLATION FORM

PRIMARY ACCOUNT HOLDER (MUST BE THE PAYER)

Name _____

Telephone Number: _____ Street Address: _____

City: _____ Postal Code: _____ E-mail Address: _____

I hereby advise the City of Edmonton that I wish to withdraw one or more memberships from the Pre-Authorized Monthly Debit Program and cancel one or more of my Continuous Monthly Membership(s).

CLIENT NAME (PLEASE LIST ALL MEMBERSHIPS ON THE ACCOUNT)	MEMBERSHIP NUMBER	MEMBERSHIP STATUS	
		TO CANCEL	TO RETAIN

My Continuous Monthly Membership form has been completed

- ☐ before the 15th of the month, therefore my cancellation will be effective next month _____ year _____
- ☐ after the 15th of the current month, therefore I am responsible for the next month's payment, making my cancellation effective the following month _____ year _____

- I understand that any outstanding amounts now become due and payable.
- I have advised all members on my account regarding the cancellation of our membership.
- I certify that the signatures below belong to the primary account holder and joint account holder (if applicable)

Signature of Primary Account Holder:

X _____

Signature of Account Card Holder (if applicable):

X _____

Name: (Please print) _____

Name: (Please print) _____

Date: _____

Date: _____

Email this form to EFTCancellations@edmonton.ca or You can drop-off this cancellation form at any City of Edmonton Recreation Centre, or mail it to:

Community Facility Services Pre-Authorized Payment Coordinator

City of Edmonton Community Services Department

14th Floor, CN Tower

10004 104 Avenue

Edmonton, Alberta, T5J 2R7

This information is being collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act*. It will be used to provide you with a Pre-Authorized Monthly Payment Program. If you have any questions about the collection, use or disclosure of personal information by this program, contact Community Facility Services Pre-Authorized Payment Coordinator at 780-944-0415.

