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30-Day Cancellation Request - Mail-In

Month to Month <u>OR</u> Contract - Cancellation Request (<u>\$99 Cancellation Fee or Buyout</u>) Please circle correct membership status

Name (list all names/accounts):									
Cell phone:									
Last Four Digits of Card on Fi	ast Four Digits of Card on File (for mail in forms only):								
How often did you use the facilities?									
Once a month	Once a we	Once a week		2-3 times / wk			4+ times / wk		
On a scale of 1-5 (5 being the	e highest), hov	v do you	ı rank y	our ove	erall Tex	as FITT	experience?		
leason for rating?									
What were your desired fitne	ess, health, an	d/or nu	tritiona	l goals?)				
Did you meet those goals (ci	rcle one)?	Yes	/	No					
Which of the following tools	and services o	lid you ı	use? (Ci	rcle all	that ap	ply)			
All-Access Membe	rship Fitı	ness Co	nsultati	on	Pe	rsonal ⁻	Training		
Group Training	Styku 3-D Bod	y Scann	er	Group	Classes	;	Kid's Club		
	Listen to Yo	our Bod	y Kra	v Maga					
What is the main reason for	canceling you	ır meml	pership	?*					
Did you find the gym clean?	Yes	/	No						
Did you find a wide range of	equipment?		Yes	/	No				
Did the staff provide good customer experience?				Yes	/	No			
Did you find the staff knowledgeable?			Yes	/	No				
Do you have any suggestions	or comments	to help	improv	e Texas	FITT?				



Date:	

I hereby certify that I wish to cancel my membership with Texas FITT. I understand that my account must be in good standing in order to complete this request. I understand that I am responsible for any billing that will occur within the next 30 days OR within my agreed upon, contracted amount of time. I am also subject to any terms and fees that apply according to my management agreement. I will commit myself to maintain a healthy lifestyle.

Print N	Name:	
Signat	ure:	
Interna	al Use Only:	
0	Management Approval	
	o Method of contact:	
0	Membership Canceled / Frozen	
0	Recurring Services Removed	
0	Employee Initials	
0	Scanned	
0	Marked as "Not Interested" in system	
0	Stat report	
0	Processed by: on	