

Membership Change Request Form

Club Use Only

Name: _____

Phone: _____

Email: _____

- Staff Member initial and date _____
- Received (Date and Staff Initials) _____
- Check Membership account balance
- Completed in RA
- Listed on Monthly Membership Statistics
- Scanned
- Filed Digitally

Date of Notice: ____/____/____ Please notify 30 days in advance. Membership changes will be effective on the last day of the month following the 30 days of notice.

Signature: _____

Suspension \$50 maintenance fee per month; MAX 2 months/year. Note your membership will resume automatically after the suspended month is complete.

Suspension starting the 1st of _____

Re-start my membership on the 1st of _____

Conversion Additions are prorated. Conversion to individual will be effective on the 1st of the upcoming month.

• **Convert From (Membership Type):** _____

Convert TO (Membership Type): _____

• I would like to REMOVE the following from my membership

○ Name _____ Phone _____

○ Name _____ Phone _____

• I would like to ADD

○ Name _____ Phone _____

Relation: _____ Birthdate ____/____/____

○ Name _____ Phone _____

Relation: _____ Birthdate ____/____/____

Effective Date: _____

I wish to take action on my membership at the Athletic Club at the Westin. As stated in the Membership Agreement, the effective change date will be **no less than 30 days** from the notice date. I understand that my account balance, must be paid in full before any action will be completed. Management will evaluate request and make final decision.

Forms can be emailed to memberships@athleticclubwestin.com

ATHLETIC CLUB
AT THE WESTIN