



North Central Florida Family YMCA Membership Freeze Form

Date: _____ Unit#: _____

Primary Acct. Holder's Name: _____

Freeze Rules:

- Cost \$10 per month, paid in advance
- Members cannot freeze a month that has already begun.
- Memberships can be frozen for up to 6 consecutive months at a time.
- Freeze dates begin on the first day & end on the last day of the month, no exceptions.
- If on auto draft, your draft will resume on the 15th of the month following the end of the freeze.

Freeze begin date: _____

Freeze end date: _____

Draft resume date: _____

Total Fees Due: _____

- I will be paying cash for each month of the freeze
- Please draft my Bank account the YMCA has on file
- Please draft my Credit Card the YMCA has on file

Member Signature: _____ Date: _____

Staff Initials: _____ Date: _____