



Membership Update Form

YMCA of Greater Long Beach P.O. Box 90995 Long Beach, CA 90809-0995

OFFICE USE ONLY
Date: _____
Receipt #: _____

Branch: Downtown Fairfield Los Altos Los Cerritos Weingart-Lakewood

Member Information (Please Print)

Last Name: _____ First Name: _____ Middle Initial: _____

Date of Birth: ____/____/____ Gender: Male / Female Ethnicity: _____ Marital Status: _____
(Optional)

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Membership Modification

New Address: _____
Street Unit# City State Zip Code

New Phone Number: _____ This is my: Home Cell Work Other

New Membership Type: I wish to change my _____ to a: (check one)
Current Membership Type

- 1 Adult Family Adult Teen/Student Association Wide – Adult
- 2 Adult Family Senior (62+) Senior Couple Association Wide – Family

I hereby authorize my membership rate to change from \$ _____ to \$ _____
Current Fee New Fee

Please ADD or REMOVE the following individuals to/from my membership: (Please Print)

Last Name	First Name	Gender	Date of Birth	Age	Action
1.		M / F	/ /		Add / Remove
2.		M / F	/ /		Add / Remove
3.		M / F	/ /		Add / Remove
4.		M / F	/ /		Add / Remove
5.		M / F	/ /		Add / Remove

Emergency Contact Information (Please Print)

Last Name: _____ First Name: _____ Middle Initial: _____

Phone: _____ Relationship: _____

Membership Payment

New Account Information: * Please fill out the ACH form on the reverse side of this page

Returning Member Amount Paid: \$ _____ Cancellation/Hold Date : _____

Renewal Amount Paid: \$ _____

Membership Payment Amount Paid: \$ _____ For the month of: _____

Other (please explain) _____

Automated Clearing House (ACH) Authorization Form

Account Holder Information:

Last Name: _____ First Name: _____ Middle Initial: _____

Home Address: _____

Street

Unit#

City

State

Zip Code

Home Phone: _____ Work/Cell Phone: _____

Financial Information (choose one):

Checking/Savings (must attach voided check/deposit slip)

Financial Institution: _____

Account Number: _____

Routing Number: _____

Preferred Draft Date: _____ 1st / _____ 15th

Credit Card

Card Type: Visa / MasterCard / AmEx / Discover

Card #: _____

Expiration Date: _____ / _____

Preferred Draft Date: _____ 1st / _____ 15th

Membership Policies and Authorization

A voided check or credit card information is required to process your ACH payment.

Automated Clearing House (ACH) is the automated monthly deduction from your credit card, checking or savings account to pay for your YMCA Membership. To authorize the deduction you must complete this Membership Application and fill out the credit card information or attach a voided check. The YMCA will process your paperwork and notify your bank.

Please Initial:

_____ Drafting Date: ACH deductions will only be taken out on the 1st or 15th of each month.

_____ Cancellations: Memberships may be cancelled at any time provided that you notify the YMCA, ***in writing, 30 days in advance*** of the requested cancellation date. Any membership cards must be returned at this time. Cancellations may NOT be processed over the phone. I further understand that canceling my membership does not relieve me of the responsibility of paying my account in full.

_____ Account Changes, Insufficient Funds, Declined and/or Closed Accounts: You must notify the YMCA of any bank account or credit card changes, submit the new information and pay for one month in advance. All bank drafts or credit cards returned due to insufficient funds or any other reason will be ***charged a \$20 processing fee***.

_____ YMCA membership changes: Membership categories and fees are subject to change. The YMCA will make attempts to notify all members in advance of any adjustments/changes made.

I understand the above information and agree to the terms. I understand that I am responsible for delinquent payments and additional charges made to the YMCA for returned drafts, declined credit cards, insufficient funds, change in account or closed account.

I hereby authorize the YMCA of Greater Long Beach to initiate debits to my checking/savings or credit card account as indicated. I understand it will take 30 days to cancel my membership. All Memberships are NON-REFUNDABLE and NON-TRANSFERABLE.

I understand that all membership modifications and changes are subject to approval by the membership department at the YMCA of Greater Long Beach. Furthermore, I understand that this process may take up to (30) days to complete.

Signature of Account Holder

Date