



Recreation Center

Membership Cancellation Form

"Optimizing the Experience of Living"

Please complete this form and return it to the front desk or via email to CRC@colchestervt.gov. The Director will need to approve this request before any action can take place on your account.

Membership #: _____ **Today's Date:** _____
First Name: _____ **Last Name:** _____
Phone: _____ **Email:** _____

Membership Type: Adult Senior Family Youth

Family Member Name(s) (if applicable): _____

Membership Cancellation

Annual memberships can be cancelled after 90 days of sign-up. We do not allow cancellations prior to the 90 days. You must provide 60-day notice by completing and submitting the Membership Cancellation Form.

Reason for Membership Cancellation:

I understand and confirm the changes made to my account. I acknowledge that I will not receive any refunds and past due fees for the household must be paid in full in order to register for any other Recreation program. This form must be submitted 60 days prior to your billing due date.

Signature: _____ Date: _____

OFFICE USE ONLY

MEMBERSHIP #: _____

STAFF INITIALS: _____

EFFECTIVE DATE: _____

DIRECTOR SIGNATURE: _____