



**Membership Transfer
Fitness Centre Membership**

Administrative Fee: \$10 plus H.S.T.

Date Submitted: _____

Current Membership Type:

Adult Household Student Other: _____

Transferring Membership Type:

Adult Household Student Other: _____

Member Information (please print clearly)

First Name	Last Name	Email Address
Address		Primary Phone Number

Membership Transfer Agreement

By submitting this form, I am providing the Town of Newmarket with 30 days written notice to transfer my current Fitness Membership to a different membership type. I acknowledge that the amount of the monthly scheduled payments will change to reflect the new membership type rate and that in completing this transfer, the dates of my scheduled payments may change in accordance to when the new membership type becomes effective, unless specified otherwise. I understand that the amount of the first payment of the new membership type may be different than the remainder of the scheduled payments to account for the prorated dates from the previous membership type. In signing this form, I acknowledge that approvals to Transfer requests will only be made with a zero account balance.

Should I choose to transfer to a different Town of Newmarket Fitness Centre membership type after the termination of my current membership; the new membership will be calculated using current fitness centre membership rates.

Client Signature: _____ Date: _____

Staff Initial: _____

Please email to **fitness@newmarket.ca**, mail or drop off completed form to:
Town of Newmarket - Magna Centre, Attn. Newmarket Fitness, 800 Mulock Drive,
Newmarket, ON, L3Y 9C1

For Administrative Use Only

Payment Date	Process Date
Final Payment Date	
Date of Membership End	
Notes (if any)	