

Notification of Membership Resignation

Personal Details	
Name:	Membership No:
Address:	
Postcode:	Tel:
Membership cancelled with effect from:	
The staff at Westside would appreciate it if you would take a few n Any comments you make will assist us in providing a better Club ar Thank you for your feedback and for allowing us to serve you here a	nd service in the future, and would be greatly appreciated!
1. What was your overall rating of Westside Health and Fitness Club? (worst) 1 2 3 4 5 (best) 2. Why did you resign from Westside? 3. What did you enjoy most about the Club?	4. Please state aspects of the club which you think could be improved. 1. 2. 3.
	5. Did you leave because you were dissatisfied with some aspects of the Club? Yes / No If Yes please specify
	6. Are there any conditions under which you would re-join?
I confirm I will cancel my monthly direct debit with my bank and wi are processed due to my failure to do so!	Il not hold Westside responsible for any subsequent payments which
Members Signature:	Date:
Westside Signature:	Date:
Please return to the Clubs Membership Department	



