Membership Hold Request Form

Please email form to membership@riverbrookymca.org or hand in to the front desk. Request is not complete until you receive an email confirmation.

Member Name:_____ (please print)

Email:_____ **Date**:_____

Members are allowed to pause their membership for up to 3 months at no cost.

You may hold an additional 3 months for $20 a month.

Please Select Hold Months:

***If you select over 3 months, you will be automatically drafted $20 on the 1st of each additional month.**

January ☐	**April** ☐	**July** ☐	**October** ☐
February ☐	**May** ☐	**August** ☐	**November** ☐
March ☐	**June** ☐	**September** ☐	**December** ☐

Reason for Hold:

Financial Issues ☐	**School** ☐	**Vacation** ☐	
Medical ☐	**Seasonal** ☐	**Work** ☐	**Other:** _____

Optional:

I would like access to the Y Wellness 24/7 virtual platform for a donation of $10 a month, via my credit card: ☐ **Yes!**

I understand that upon completion of my membership hold, my membership will automatically become active and drafting will resume.

Member Signature:_____

Office Use Only: Placed on Hold: Emailed: