

CANCELLATION NOTICE

I, _____, am canceling my

_____ Individual membership

_____ Family membership

with JUST FITNESS 24/7 **effective** _____, 20__.

Please check one of the following reasons:

_____ moving

_____ not using it as much as you thought

_____ financial reasons

_____ other

**I understand that my account will no longer be drafted if this request is submitted before 5 business days of my withdrawal draft date. If submission is not received before 5 business days of withdrawal date, then my account will be drafted for one final payment on withdrawal date.*

Primary account holder signature

Today's Date