

THE FLOATATION CENTRE
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Monthly Membership Cancellation Form

This form must be submitted 30 days before your next payment is due.

Date: _____

Member Name: _____

Reason for Cancellation:

Thank you for your time with The Floatation Centre. If you have any additional comments or feedback, please use this space below.

I understand that by submitting this form, I am hereby cancelling my Monthly Membership at The Floatation Centre.

Signature

Date

Staff Only

Cancelled in MBO?

Cancelled by [staff member name, date]: