

## 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 moments to complete this Membership Resignation Form. Any comments you make will assist us in providing a better Club and service in the future, and would be greatly appreciated! Thank you for your feedback and for allowing us to serve you here at Westside Health & Fitness Club.

**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?**

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**3. What did you enjoy most about the Club?**

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**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

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**6. Are there any conditions under which you would re-join?**

I confirm I will cancel my monthly direct debit with my bank and will not hold Westside responsible for any subsequent payments which are processed due to my failure to do so!

**Members Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Westside Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return to the Clubs Membership Department

*Thank you for YOUR time!*