



For Youth Development
For Healthy Living
For Social Responsibility

The Greater Morristown YMCA
79 Horsehill Road
Cedar Knolls, New Jersey 07927

P 973.267.0704

Credit Card Monthly Membership Cancellation Form

Membership #: _____ Membership Type: _____

Member Name: _____

Address: _____

Town: _____ State: _____ Zip Code: _____

Reason for Cancellation: _____

As per my Monthly Membership Agreement, this is my 30 day notice to cancel my membership (ie: if the original invoice date is 08.01.21, member must notify the Greater Morristown YMCA on/before 07.01.21).

Member Signature: _____

Date: _____

FOR OFFICE USE ONLY	
Date Received: _____	<div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: fit-content; margin-left: auto;">Staff Initials</div>