AUM Wellness Center

Payroll Deduction & Credit Card Payment Stop Form

Membership is a 3 or 12-month minimum commitment as selected on your Membership Agreement. These terms must be completed prior to cancellation. The early cancellation fee is equal to one month of your current membership fee.

Early cancellation will be approved only in an extreme case as determined by the Director such as moving more than 50 miles away or being medically unable to continue.

Must provide proof of reason for expediation. Please allow up to 10 days for

processing.	oj reason jor cancenatio	on. Please allow up to 10 days for
Date:		
		
		Last:
Address:		
Phone# (Between 8	Sam - 5pm):	
E-mail Address:	-	
Please check the m	onthly deductions you	would like stopped:
☐ Faculty/Staff ☐ Re	etirees 🗆 Alumni 🗆 Frien	ds of AUM □ Affiliated □ Dependent
Do you have a locke	er? 🗆 Yes 🗆 No	
membership. If you	,	gs before the last day of your ney will be bagged and stored at the donated)

Ticase take a moment	to tell us why you wish to cancel your monthly deductions:
deduction, you must pr the 1st of the month wl example, if you plan to return this form on or b	ncelling your membership that is paid through payroll ovide the Wellness Center Office 30 days' notice prior to hich you would like the membership terminated. For terminate your membership on Aug. 31st, you need to before July 30th.
Desired Cancellation Da	ate:
you or you would like to	ould like a member of the AUM Wellness Center to contact provide additional information, please provide your
you or you would like to name and telephone nu	o provide additional information, please provide your umbers on the lines provided below or send us an e-mail a
you or you would like to name and telephone nu wellnesscenter@aum.e	o provide additional information, please provide your umbers on the lines provided below or send us an e-mail a