

Center _____ Person ID _____ Join Date ____ / ____ / ____

YMCA CORPORATE PARTNER CHANGE OF INFORMATION

Last Name _____ First Name _____ Middle Name _____

Preferred Name (if different) _____ Birthdate ____ / ____ / ____

Company Name _____

Changed Address _____ Apt # _____

City _____ State _____ Zip _____

Phone: Home (____) _____ Work (____) _____

Current Name _____

Old Account Bank Draft (Specify draft date: 1st 15th) Invoice : 12 month 6 month

Membership Type: An upgrade fee may apply. From _____ To _____

Other Changes: Amenities, errors, etc.: _____ Employer _____

Spouse:

Last Name _____ First Name _____ Middle Name _____

Preferred Name _____ Birthdate ____ / ____ / ____ Male Female Add Delete

Spouse's Employer _____ Work Phone (____) _____

Children/Dependent Information:

Last Name	First Name	Middle Name	Preferred Name	Birthdate	Gender	Change
				____ / ____ / ____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Add <input type="checkbox"/> Delete
				____ / ____ / ____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Add <input type="checkbox"/> Delete
				____ / ____ / ____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Add <input type="checkbox"/> Delete
				____ / ____ / ____	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Add <input type="checkbox"/> Delete

I understand it may take up to 30 days for the change to take effect.

Member Signature _____

Date ____ / ____ / ____

Staff Signature _____

Date ____ / ____ / ____

Receipt # _____	OFFICE USE:	Upgrade Fee Paid: Join Fee \$ _____	Month Fee \$ _____
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