

# CANCELLATION FORM

## SALARY SACRIFICE FORTNIGHTLY PAYMENTS

### Employer Payment of Unigym Membership Fees



#### LOCATION

<input type="checkbox"/> Hobart	<input type="checkbox"/> Launceston
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#### PERSONAL DETAILS

Name	Surname
UTAS Staff ID Card No.	Unigym Member No.

#### TERMS

**I understand**

*Conditions*

- Unigym must receive this form with a minimum of 30 days notice to cancel this membership.
- Access to the Unigym will cease one fortnight after the last deduction from your salary is made (please check your pay roll details to ascertain whether a deduction has been made).

*Payments*

- Unigym will endeavour to cancel my membership as soon as possible after it receives this form however I acknowledge that it may take up to 30 days for payments to cease (or up to 45 days if given less than 30 days before Christmas or Easter holiday periods)
- I acknowledge that during the Cancellation period, fortnightly deductions from my salary will continue up to a maximum of two deductions over the normal 30 day Cancellation period but, up to a maximum of three over a holiday Cancellation period. If any salary deductions are made in addition to these, they will be refunded to me.
- I acknowledge that if I wish to recommence my membership I will be charged a \$75 establishment fee to cover administration.

#### REASONS FOR CANCELLATION

**To help us continually improve our services please tick the box that best explains your reason/s for cancellation:**

Not enough time    Joining another fitness centre    Too many members    Hours of operation

Inadequate facilities/services    Do not like the atmosphere    Other \_\_\_\_\_

Full Name	Signature
Email	Date

#### UNIGYM STAFF AUTHORISATION

STAFF NAME	INITIAL	DATE
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SCANNED TO PAYROLL AND KAREN HAIG

DATE SCANNED: \_\_\_\_\_

