



YMCA of Greater Hartford Membership on Hold Agreement

First Name (please print clearly) _____

Last Name (please print clearly) _____

Address: _____

Town/City: _____ State: _____ Zip Code: _____

Key tag barcode # (helpful if you have it) _____

The YMCA of Greater Hartford agrees to put the above member's membership on hold:

Begin Hold Month: April 1 Return to Y Month: TBD

Reason for Hold (circle one): Covid-19 Other _____

I understand the following terms and conditions apply (initial each statement):

1. A membership to the YMCA of Greater Hartford can be put on hold one time per calendar year for a full one to three consecutive months. _____ (initial)
2. While a membership is on hold, monthly membership fees will not be collected. _____ (initial)
3. While on hold, any program registrations will be charged at the non-member rate. _____ (initial)
4. All guest pass privileges are suspended; member's guest passes may not be used. Members who are on hold may come in with an active member and pay the guest with member day pass fee. _____ (initial)
5. All visiting Y privileges using Reciprocity and A.W.A.Y program are suspended while on hold. _____ (initial)
6. Only memberships in good standing (no outstanding invoices) can be put on hold. _____ (initial)
7. A hold does not imply nor constitute a cancellation of membership. _____ (initial)
8. The membership will **automatically be reactivated** (when Date of reopening is determined)

and at that time, the member's account will automatically be charged their existing member rate of \$ _____. _____ (initial)

Member Signature: _____ Date: _____

Email address for confirmation: (print) _____

MEMBER SERVICE STAFF TO COMPLETE:

Member Account #: _____ Draft Date: 1st 15th

New Expiration Date: _____ (Only for memberships paid annually)

Member Received a Copy _____ (MSR initials) Staff Initials: _____ Date: _____