



FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

YMCA of Greater Hartford

MEMBERSHIP ON HOLD AGREEMENT

Please Write Clearly

First Name: _____ Last Name: _____

Address: _____ City _____ State: _____ Zip: _____

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: _____