

of it here for a manager to amend.

## **MEMBERSHIP SUSPENSIONS**

| <b>CONTACT DETA</b>  | ILS   |   |   |
|--|---|---|---|
| Title:   |   |   |   |
| Full Name:   |   |   | D.O.B:  |
| Phone:   |   | Mobile:   |   |
| Email Address:   |   |   |   |
| MEMBERSHIP S   | USPENSION   |   |   |
| Membership Numbe   | r   |   |   |
| Membership Type:   | ☐ Platinum ☐ Esser  | ntials  | ol  |
| Please suspend my i  | membership from: Start D  | ate: End Date:  |   |
| SUSPENSION TI  Membership susper A minimum susper A \$5.00 processing Membership susper Your membership v All medical susper must be presented Memberships purch Membership and LT | ERMS & CONDITIONS  nsions are available on all fixed te sion period of 2 weeks is required fee applies prior to suspending your substitution of the backdated, unleaded will automatically recommence after sions are free of charge upon presult the time of suspension request thased under a 'Membership Special Unternational 4 Month Upfront O | rm memberships.<br>and a maximum suspension period of 12 months | the date specified on this form).<br>all requested suspension dates. This<br>one month.<br>, LTU Melbourne Upfront Gold |
| ACCEPTANCE I confirm that all the Conditions above.  | details provided are accura   | ate and that I have read, understood and                        | agree to the Terms and  |
| Signature:   |   | Parents Signature:  |   |
| <b>5</b> .   |   | <b>-</b> .  |   |
| Date:  |   | Date:   |   |
|  |   | (s  | ignature of a parent required, if you are 18 and under)   |
| OFFICE USE:  | ☐ Member Suspended ☐ Fees Paid  | CUSTOMER SERVICE STAFF: Membership Number:                      | MANAGEMENT: Verified by:  |
|  | Further Action*   | Suspended by:   | Date Verified:  |
| Please note: if you cannot suspend<br>a customer for the duration they<br>have requested. Please suspend it  |   |   |   |
| to where you can and make a note   |   | poava.  |   |