



Date: _____

MEMBERSHIP FORM

___ Mr. ___ Miss ___ Ms. ___ Mrs.

Last Name _____ First Name _____ Middle Initial _____

Address _____ City _____

State _____ Zip _____ Phone Number _____

Email Address _____

Please select your membership option:

___ **Individual Membership \$34/Month**

___ **Individual Enhanced \$54/Month**

___ **Couple Membership \$51/Month**

___ **Couple Enhanced \$71/Month**

Name of additional member: _____

▪ This may include any two family members who reside together

Monthly Automatic Credit Card Charge

Circle One: Amex MasterCard Visa Discover

Name as it appears on the card _____

Card# _____ Expiration Date _____

___ I authorize Elements to charge my credit card \$_____ per month until I request cancellation of my Elements membership.

I understand that this membership is not refundable or transferable.

I understand that after I have completed the term of this membership, as set forth previously, **my membership will automatically renew/roll-over unless I provide written notice of cancellation at least 30 days prior to the date I am requesting cancellation to begin.**

Freezing Policy

- I understand that I have the option to freeze my membership for a MAXIMUM OF THREE MONTHS throughout the calendar year
- I must provide written notice at least 30 days prior to the date I am requesting freeze to begin.
- I must indicate a freeze begin date and a freeze end date and my membership cannot be frozen indefinitely.
- I must choose freeze dates that are in the increment of full months, not partial months. (Correct example: June 1st-July 1st, Incorrect example: June 15th-July 15th)
- I understand that my membership cannot be frozen for more than 3 months within the calendar year.

The above mentioned written notice consists of a cancellation and/or freeze form that can be picked up at either Elements location.

The form(s) applicable to your request(s) must be turned in 30 days prior to the begin date of the requested change in your membership.

Signature _____

Date _____

I have reviewed the cancellation and freeze policy with this Elements member.

Staff member initials: _____

www.community-first.org/elements

THE BEVER | 820-5047 | 855 Stahlheber Road | Hamilton, Ohio 45013

THE SQUARE | 896-8087 | 100 Berkeley Drive | Hamilton, Ohio 45013

