



Renewal Form

Name: _____

Address: _____

Membership Num: _____

Date: _____

a) I wish to renew my membership

Paying in Full

Cheque Credit Card

Membership Amount: _____

Children: _____

Total Amount Paid: _____

B) I wish to renew my membership, but change my payment method to direct debit

Paying by Direct Debit

Cheque Credit Card

First Months Fees: _____

Children: _____

Total Amount Paid: _____

C) I wish to change my membership to: _____

Paying in Full

Cheque Credit Card

Membership Amount: _____

Children: _____

Total Amount Paid: _____

Paying by Direct Debit

Cheque Credit Card

First Months Fees: _____

Children: _____

Total Amount Paid: _____

D) I wish to cancel my membership (Please Tick)

I agree that I have read & agree to comply with the membership terms & conditions.

Signature: _____

Date: _____

Mardyke Arena Staff Signature: _____

Date: _____