



Name on the Card: \_\_\_\_\_

Payment Method: Visa / MC / Discover / Amex / Cash

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

V-Code: \_\_\_\_\_ (3-digit code on back of card)

Billing Zip Code: \_\_\_\_\_

You may cancel your membership within three business days of your join date and receive a full refund and/ or pay the difference from the classes you have already taken. After that, your membership can be terminated on an involuntary or voluntary basis.

\*Cancellation Fee Policy applies to 6 month and 12 month membership contracts.\*

**Involuntary Membership Cancellation**

You may cancel your Membership Agreement during the initial term of your membership upon the following conditions:

- Medical: If upon a doctor’s written order you cannot physically receive the services because of a significant physical or medical disability for a period of time
- Moving: You change your permanent residence to a location more than 25 miles from Stiletto Dance Studios. Cancellations must be accompanied by written proof (i.e. driver's license, utility bill, car insurance, etc.)
- Military: due to active duty

Voluntary Membership Cancellation. (You may choose to cancel your membership at any time.)

\*Cancellation Fee: 50% of remaining contract balance which is owed.

- Cancellation forms should be completed as indicated above and returned/delivered to the Manager Member Services desk or emailed to: StilettoDanceStudios@gmail.com
- The manager of member services will notify the member you once that cancellation have been processed.
- Keep in mind there may be a delay in processing this request; Please allow 30 days notice sent to and acknowledged by Stiletto Dance Studios after your request.
- All cancellations will be processed within 30 days from notice.

Once you have been approved for cancellation you will be relieved from making payment for membership dues.

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City/ State / Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Membership Start Date: \_\_\_\_\_

Remaining Balance Due: \_\_\_\_\_

Cancellation Date: \_\_\_\_\_

Cancellation Fee Due: \_\_\_\_\_

Please fill out payment portion to of this form to process cancellation fees due. Payment Information located top corner.

\*All payments and collections are reported to the credit bureau.