Sonoma Aquatic Club
Request for Membership Freeze

Name:_____,_____
(Last Name) (First Name)

Phone Number:_____ Bar Code:_____

Leave of Absence "Membership Freeze": You may freeze your account for up to 3 months per calendar year. Your monthly dues will be adjusted to reflect the number of active members on the account. If there are no active members on the account during the freeze, there will be a $15 processing fee as well as a $10 maintenance fee for the first month the account is placed on a freeze. Any following consecutive months will be charged the $10/month maintenance fee.

Leave of Absence "Medical Freeze": A medical freeze may be granted to a member if the member has a medical condition that requires the account to be frozen for a period of time. Same rules and fees apply as with a regular Freeze, see above. Membership freezes are granted at the discretion of SAC Management, upon receipt of a doctor's note.

Type of freeze requested:
□ Medical Freeze □ Regular Freeze (3 month maximum per calendar year)

Name of people you wish to freeze: □ Entire Membership

_____

_____

_____

Start date of Freeze:_____ End date of Freeze:_____

*Please note: Frozen members are not permitted to use the facility.
**Please note: Freeze requests must be submitted 5 weekdays before billing date.

Signature:_____ Date:_____
Must be primary member on account.