



EVOLUTION TRAINING CENTER, LLC
460 Milltown Road, Bridgewater NJ, 08807
www.TheEvolutionGym.com

NOTICE OF REQUEST TO CANCEL CLASS

Name of Student _____

Class Level _____ Day _____ Time _____

This document will serve as notice that the above named student will be cancelling their placement in the above named class at Evolution Training Center, LLC (ETC).

I understand that I must cancel placement in a class by the 20th of the month, and such notice must be received by ETC or I will be billed for the next month. I further understand that any cancellation received after the 20th will go in effect for the second calendar month. (Example: Notice received before September 20th will be in effect as of October 1st. Notices received on or after September 20th will receive an effective cancellation date of November 1st.)

Signature

Date

Reason for Cancellation

- Moving/Relocating
- Financial Considerations
- Other Commitments
- Lack of Interest
- Injury
- Facility Issue
- Instructor Issue

Date Received _____ Recieved by _____

Effective Cancellation Date _____

Dropped in JR on _____

Customer Service Manager Signature _____ Date _____