**ACTIVE ONE CLASS MEMBERSHIP - 12 MONTH AGREEMENT FORM**

Prior to commencing on the Class Membership, it is important that you read this agreement carefully and complete and sign this form.

**Terms and Conditions*:***

* The cost of the Class Membership is $40 per week, *with no initial joining fee applicable.*
* The Class Membership includes unlimited weekly access to attend Active One Group Exercise Classes at our Frankston and Brighton locations.
* The Class Membership requires a **minimum 12 months** commitment. After the initial 12 month period, your nominated credit card will continue to be debited monthly, in advance, unless we are notified otherwise.
* Your nominated credit card will be automatically debited, **monthly in advance**, from the date of this signed contract agreement. The monthly debit will be $173.00
* Active One Exercise Classes are accessible 51 weeks of the year. Classes do not usually operate on Victorian Public Holidays – **this has been considered when determining the cost of $173.00 per month.**
* The Class Membership allows for a maximum suspension time of **6 weeks** per 12 month period, should you require time off due to health or planned holidays.
* The Class Membership requires a **minimum 2 week** period of suspension at any given time should you wish to suspend your membership.
* Private Health receipts will be automatically issued on approximately a quarterly basis.

**IMPORTANT:**

* With class limits in place, it is essential you notify our office of **any** cancellations from your regular sessions and that **all** additional sessions **must be booked in advance**.
* It is your responsibility to advise our office of planned leave should you wish to suspend your membership, with as much advance notice as possible.
* It is your responsibility to notify Active One if you wish to cancel your membership after the initial 12 month period. *A joining fee may be applicable if you cancel your membership after 12 months and then wish to re-join in the future.*

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I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to the terms and conditions stated above. I understand the agreement and give permission for Active One Group to debit my nominated credit card monthly, in advance.

 Please bill my Credit Card already securely stored on file Expiry:\_\_ \_\_ /\_\_ \_\_

 Please bill my Credit Card as follows:

Credit Card Number: \_\_ \_\_ \_\_ \_\_ /\_\_ \_\_ \_\_ \_\_ /\_\_ \_\_ \_\_ \_\_/\_\_ \_\_ \_\_ \_\_ Card Expiry Date: \_\_ \_\_ /\_\_ \_\_

Name on card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature on card:­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Regular class days & times:** (you will be pre-booked into all these sessions): ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signed: ­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Agreement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRIVACY:** This form contains personal information and will only be used by authorised Active One Group staff for the purpose stated above.