



WHERE IT'S ALWAYS
GAME ON!

Freeze Form (Adult Soccer)

FREEZE Requirements:

- (1) submit this completed FREEZE form to a FISC Welcome Desk representative at least 30 days before the requested freeze is to begin
- (2) be current with all dues, fees and other charges against your account
- (3) provide a physician's note
 - a. verifying condition and the period of time member will not be able to use FISC's facilities
 - b. verifying details for resuming physical activity (at the end of the requested medical freeze period, member must provide a physician's note stating that he/she is capable of resuming a physical exercise program)

FREEZE Rules:

- (1) A one-time freeze of up to two consecutive payments can be requested by providing a minimum of 14 days notice to take effect for the beginning of the next scheduled session.
- (2) The freeze period will be added to the end of the contract and a \$10 administrative processing fee will be required for any approved freeze.

At the end of the freeze period, patron's membership and billing will be automatically reactivated by FISC, unless patron gives advance written notice of cancellation in accordance with FISC Membership Agreement. A FREEZE WILL NOT BE GRANTED ON A RETROACTIVE BASIS.

Name (Last, MI, First): _____ D.O.B: _____

Full Address: _____

Phone: Home _____ Cell _____ Email _____

Member ID# _____ FISC Team Member _____

I hereby request that FISC, LLC freeze my monthly payment plan effective _____ Until _____
THIS FORM WILL NOT BE EFFECTIVE UNLESS A FISC MANAGER ACKNOWLEDGES IT BY SIGNING BELOW.

Member Signature: _____ Date: _____

Physician's note attached

FISC Manager Signature: _____ Date: _____

Questions? Contact Janice Sessions at jsessions@frederickindoor.com or 240.215.4040