

**Brown Family YMCA**  
**Program EFT**  
CHANGE OF STATUS FORM



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

Unit ID: \_\_\_\_\_

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

Select the Program:

☐ Pickleball Club

☐ Recurring Personal Training

☐ Teen Club

☐ Flyers Swim Team

☐ Small Group Training

☐ Flyers In Training

Reason for Change: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Member Signature: \_\_\_\_\_

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