

# CHANGE OF DETAILS



Once completed, please return printed form to your home club:

Bondi Junction Level 2, 9 Bronte Road, Bondi Junction NSW 2022 E: admin.bj@elixr.com.au  
Bligh Street 2A Bligh Street, Sydney NSW 2000 E: membercare.bs@elixr.com.au

Office Use Only - Ex ID

## • Personal Details:

Home Club:  Bondi Junction  Bligh Street

Membership No:

Given Name:

Surname:

Family Add Ons:

Do you want to update details for your child enrolled in Swim School?  Yes  No

Full Name(s):

## • Change to Contact Details:

New Address:

Suburb:  Postcode:

New Contact Numbers: Mobile:

Other:

New Email:

Member Signature

Date

## • Change of Name:

New Name:

Reason:

Supporting Documentation Attached?:  Yes  No

NB. Documentation is required before your request can be processed e.g. Marriage Certificate, NSW Change of Name Certificate or Driver Licence.

Member Signature

Date

## • Additional Information:

## • Office Use Only:

Received By:  Date Received:  Supporting Docs:  Yes  No

Approved By:  Date Processed:  Notification:  Yes  No 300817

## • Change to Billing Details:

### BANK ACCOUNT

Account Holder Name:

Bank Name:

BSB:

Account No:

Account Type:  Cheque  Savings

### CREDIT CARD

Type:  MasterCard  Visa

Cardholder Name:

Card Number:

Expiry Date:  MM /  YY

Credit Card Fee:  1.04% per fortnight

I authorise Elixr Health Clubs to debit fortnightly payments from my nominated bank account/credit card to the full value of payments due under my Membership Agreement and any other Membership agreement joint to my account. I acknowledge that this authority may not be cancelled prior to the expiry date of the minimum period of my Agreement. Payments made by credit card will attract a credit card processing fee.

Account / Card Holder Signature

Date