



ORIGINAL HOT YOGA

845 South Garfield Avenue
Traverse City, MI 49686

231.392.4798

AUTOMATIC PAYMENT CANCELLATION FORM

Please complete all information below:

NAME

E-MAIL

ADDRESS

CITY

ZIP

PHONE

I request BYTC LLC, to CANCEL my automatic payment plan. I understand there is a \$150 fee for cancelling prior to the completion of the 6 month commitment I agreed to upon enrollment. I understand that my unenrollment may take up to 30 days for my request to be processed.

SIGNATURE

DATE