

## Flexi-Shift Application

I hereby declare that I want to put the original period of my current membership (1x for max. 2 months) on hold. The days of time out will be added to the original period of my membership which will therefore extend. No further costs may arise.

**Notice:** A Flexi-Shift application can only be requested once (during a term) and cannot be requested by owners of reduced memberships!

### 1. Fitness card owner:

Name:

Surname:

### 2. Fitness card data:

Fitness card no.:

Original period:

### 3. Period of time for the Flexi-Shift (1x for max. 2 months):

First day:

Last day:

### 4. Contact information

Phone no.:

Mobile no.:

E-mail:

I hereby confirm that all data given above is correct. I am aware that I can only request the Flexi-Shift once within the original period of membership (max. of 62 days). I have to apply for the Flexi-Shift at least two days before its beginning. During the period of time of the Flexi-Shift (see no. 3) I will not be allowed to use the gym. My membership regains its validity after the requested time off. I agree that the contact information given may be saved electronically by the college sports (Hochschule sport) for any further matters. No data will be given to any third party.

### 6. Signatur

Place, Date:  Signatur: \_\_\_\_\_

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### Bearbeitungsvermerke Fitnessförderwerk (Bitte nicht ausfüllen!)

Eingangsdatum:

MA-Name:

1. StudioControl: Vertragsunterbrechung eingetragen

Bemerkung eingetragen

2. Buchungssystem: Bemerkung eingetragen (Kunden im richtigen Semester suchen!)