



Briggs Wellness Center
399 Ninth St N., Naples, FL 34102
PH: (239) 624-2750 Fax: (239) 624-2751

Whitaker Wellness Center
2330 Immokalee Rd., Ste 1, Naples, FL 34110
PH: (239) 624-6870 Fax: (239) 624-6871

NCH Wellness Center Reactivation Form

List the Names of All Individuals Reactivating	NCH Scan Tag #
1.	
2.	
3.	

Current Local Address _____ Phone _____

Email _____ Effective Date of Membership Reactivation _____

Will you be renting a locker? (\$10.00 per month or \$120 annually) **Yes** **No** If Yes, Locker Number _____

I Understand and Agree to the Following:	Initials
MONTHLY MEMBERSHIPS: A \$25.00 fee for EACH account being reactivated, in addition to the monthly membership fee (prorated based on reactivation date), must be paid at the time of reactivation. EFT drafting will resume with the following month's dues for those enrolled. Monthly memberships may not be placed on hold or cancelled prior to the first full month's billing cycle following joining or reactivating.	
ANNUAL MEMBERSHIPS: No reactivation fee applies. Membership expiration date will be adjusted by the length of the hold period. No credit will be issued for any hold period and/or portion of hold period that is less than 4 weeks. Annual members on hold for more than 12 months lose all remaining time.	
SCAN CARDS: Members are required to check in by swiping their scan card each visit. Memberships and scan cards are non-transferrable. There is a \$10.00 replacement fee for all replacement cards.	

By signing this form, member understands and agrees to the reactivation policy as outlined above.

Member Signature _____ Date _____

Wellness Staff Signature _____ Date _____

STAFF USE ONLY BELOW:

Monthly Memberships	Annual Memberships	Reactivation	Mo.	An.
Reactivation Fee _____	Months Remaining on Annual _____	Add user group		
Monthly Amount _____	New Expiration Date _____	Update status		
Locker Fee _____		Link member status		
Total Paid _____		Update address, phone and email		
Cash _____		Calculate remaining time using time/date		
Check _____		Take member's photo		
Credit _____		Attach FT student info		
EFT: confirm info in computer or member completes form		Verify hold did not exceed 1 yr		
		Update EFT/CC		
		Check for bad debt		
		Scan and upload documents		