

MEMBERSHIP CANCELLATION FORM

Please fill out the below information to cancel your Xclusive Auto Spa & Valet Monthly Membership.

Date: _____ Membership # _____

Name(s) _____ Location: _____

Phone # _____ E-mail: _____

I wish to discontinue my membership with Xclusive Auto Spa & Valet. I understand that upon the receipt of this form, I shall no longer be eligible to use the monthly membership services with Xclusive Auto Spa & Valet.

Member's Signature(s) _____

Date: _____

We are constantly striving to improve our services to our members. Please let us know the reason for your cancellation.

Financial/ Budgeting Reasons

Never Used Services

Didn't like services/ Staff Related

Moved/Moving

Other. Please Explain in the box below.

Additional Comments.

How would you rate your experience with Xclusive Auto Spa & Valet?

Excellent

Very Good

Fair

Poor