

This form is to be used only if the member has **no other ownership at your resort and wishes to cancel his/her membership.** To delete only a portion of the member's ownership records, use the Membership Information Update form.

REMINDER: Please be aware that any future SPACEBANK® that has occurred against the week associated with this cancellation will remain as is in the RCI SPACEBANK Pool. If you have any questions, please contact your Account Specialist.

Please type or print clearly.

NAME OF RESORT _____ RESORT ID # _____

UNIT OWNED _____ INTERVAL OWNED _____

Please submit a separate form for each co-owner who has a separate RCI ID number.

MEMBER'S NAME _____ RCI ID # _____
(Last) (First) (MI)

SPOUSE OR CO-OWNER WITH SAME ID _____
(Last) (First) (MI)

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

COUNTRY _____ HOME PHONE _____ BUS.PHONE _____

**THE ABOVE MEMBER NO LONGER OWNS AT OUR RESORT.
 PLEASE CANCEL THE MEMBERSHIP.**

COMPLETED BY _____ DATE _____

TITLE _____ TELEPHONE _____

COMMENTS _____

ALL INFORMATION REQUESTED ON THIS FORM IS VITAL TO EXPEDITE THE PROCESSING OF CANCELLATIONS. YOUR COOPERATION IN PROVIDING THIS INFORMATION WILL ENSURE THAT YOUR NEW MEMBERS ARE PROCESSED IN A TIMELY FASHION.