

Gym Account Closure Request

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Gym Name]
[Gym Address]
[City, State, Zip Code]

Dear [Gym Manager's Name],

I am writing to formally request the closure of my gym account, effective immediately. My account details are as follows:

Account Holder Name: [Your Name]
Membership ID: [Your Membership ID]
Date of Birth: [Your Date of Birth]

Due to [brief reason for closure, e.g., moving, financial reasons, etc.], I have decided to cancel my membership. I kindly ask you to confirm the closure of my account and any final billing procedures necessary.

Thank you for your assistance. I have greatly appreciated my time at [Gym Name].

Sincerely,
[Your Name]