

Autopay Cancellation Letter

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Gym Name]

[Gym Address]

[City, State, Zip Code]

Dear [Gym Manager's Name],

I am writing to formally request the cancellation of my autopay membership for [Gym Name]. My membership ID is [Your Membership ID].

Please process this cancellation effective immediately. I understand that I may have to settle any pending dues if applicable. I would appreciate a confirmation of the cancellation and any further instructions if necessary.

Thank you for your assistance.

Sincerely,

[Your Name]