



Auto-pay plan cancelation form

Please complete all information

Name: _____
e-mail _____
Address _____
City/ZIP _____
Phone _____

I request Hot Yoga Detroit to CANCEL my automatic payment plan.

I understand there is a \$150 fee for cancelling prior to the completion of the commitment I agreed upon enrollment I understand that my unenrollment may take up to 30 days to be processed.

Signature _____ Date _____