

Inactive Status Form

I, _____, am withdrawing my child (ren) or myself from the TXLA program, effective on the last day of the current billing cycle (monthly dues will not be partially refunded except in the case of a verified medical condition or injury).

I understand this form must be **submitted by the 15th of the month before the month I plan to withdraw. If submitted after the 15th of the month, the next month's fees are due in full.** I further understand that my account **must be current and all outstanding meet fees and volunteer fees (if required)** must be met before my membership will be cancelled.

Participant #1: _____

Participant #2: _____

Sport(s): _____

Date you would like to go inactive: _____

Reason for inactive status: _____

(Note: Medical conditions requiring immediate withdrawal and/or a partial month refund before the next billing cycle require a doctor's note.)

Please check one:

Cancel my account at the end of the month- I or my child (ren) plan to return before the season concludes on July 31st. **I will email membership when I plan to return, so they may activate my account before the 1st of the month.**

Cancel my account at the end of the month- I or my child (ren) will be withdrawing permanently for the season.

I plan to renew for the 2023-2024 Season (Sep2023- July 2024)

I do not plan to renew for the 2023-2024 Season

I understand that my membership will be cancelled before the next billing cycle if TXLA receives this completed Inactive Status Form by the 15th, and all my fees are paid in full. If I wish to re-enroll, my account must be paid in full. I understand that I must contact **txlamembership@austin.utexas.edu** before the 1st of the month to reactivate my account.

Parent/Participant Signature

Date Submitted

Email _____

Phone _____

Please submit form by email to **txlamembership@austin.utexas.edu**