

**HEALTH  
CLUB  
JORDAAN**

---

**Form for revoking the membership agreement**

Please only fill out this form if you want to revoke your membership agreement. This is only possible for agreements that were adopted from a distance through Health Club Jordaan's website.

**To:**

**Health Club Jordaan  
Eerste Rozendwarsstraat 10  
1016PC Amsterdam  
020-4897676**

Hereby I would like to revoke my membership agreement with Health Club Jordaan (only possible within 14 calendar days after adopting the agreement from a distance).

Membership:

Name and surname:

Address:

Date of birth:

Phone number:

Email address:

Signature\*:

Date:

*(\*only required if the form is submitted hard copy at the front desk of Health Club Jordaan)*