

Date

I/We are requesting to terminate my/our Wood	lhaven Swim & Tennis Club Membership:
Stock Number (if known):	
Date/Year Issued (if known):	
Name(s) on Stock Certificate:	
City, State zip code:	
Mail Stock Refund to (if different from the abo	ove address):
Street/PO Box Mailing Address:	· 
Mailing City, State zip code:	
	d sign below affirming your resignation. Please by tennis court keys you have. Stock refunds will be
the pool-operating season (June – Aug). Mem upon receipt of request forms and certificate. I	time; however, refund checks are only issued during bers leaving the Dayton area will be issued refunds Members who resign in 2018 (or later) have 5 years k refund form and stock certificate (if applicable).
\$10.00 for each year or part of a year you were	tock Refund Check will be equal to \$250.00 less
Please send this completed form, your Stock C you have any) to:	ertificate (if you have it), and Tennis Court Keys (if
	ngton Pl, Beavercreek OH 45434
Sincerely, Woodhaven Board of Trustees	
Stock Owner's Signature	Co-Owner's Signature (if two names on stock)
☐ I/we are returning our stock certificat	e.
☐ Woodhaven is holding my stock certi	ficate (Stock # 2049 and higher only).
☐ I/We are returning our tennis court ke	ey (if applicable).