

RESIGNATION FORM

The Fitness Centre at Aarhus University

Please fill in with capital letters

AUID
First name
Last name
Date of Birth
Workplace (place of employment)
Phone number
Card number

Date _____ Signature of the member _____

Date _____ Signature of the Fitness Centre officer _____

Information for the AU salary office (filled in by the Fitness Centre)

Payroll code: 9046	Data of resignation
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Please send this form to medlemsreg-lonAU-motion@au.dk

Please note that the resignation enters into force from the last date of the month. The subscription to FMAU will appear on the pay check you receive the month after resignation, because you are paid in arrears..