STREAMLINE AQUATICS — ACCOUNT HOLD REQUEST FORM

Submit by the 20th of the prior month. Account must have a $0.00 balance to process.
Email completed form to: billing@streamlineaquatics.org

Policy Terms (summary)

- Submit this form by 11:59 pm San Antonio time on or before the 20th of the month prior to the requested hold.
- Dues billed at 50% for each whole Monthly Billing Period on hold (Jan–Dec).
- Membership continues until you notify us in writing using this form (email to billing@streamlineaquatics.org).
- Swimmer may not practice or enter meets during hold period; last eligible practice/meet date is the day before the hold month begins.
- Account must have a $0.00 balance owing for the request to be finalized.
- Medical holds: attach a physician's note to request a policy exception.

Swimmer's Name *

Practice Pool

Swimmer's Group (check one) *

- ☐ Explorer 1
- ☐ Explorer 2
- ☐ Explorer 3
- ☐ Home School
- ☐ Inspired
- ☐ Dream Team (DT)
- ☐ Performance

Requested Hold — Monthly Billing Period * (e.g., "April")

Anticipated Month of Return *

Form Submission Date *

Reason for Hold *

Parent/Guardian Name *

Parent/Guardian Email *

Signature (type full name if submitting electronically) *

Date *

☐ I have read and agree to the Policy Terms above.

Directions: Type directly into the fillable fields, save the PDF, and email it as an attachment.
Suggested filename: LastName_FirstName_Hold.pdf
Email to: billing@streamlineaquatics.org on or before the 20th of the prior month.