



Dear SafeGuardian Subscriber,

We sincerely appreciate the opportunity to have been of service to you, your family or loved ones. You may cancel your SafeGuardian monitoring services at any time without penalty or early termination fees.

All cancellation requests must be in writing and be delivered to us – along with all rental/leased equipment – no less than seven (7) days prior to your next service plan renewal date to avoid being automatically charged for your next service period.

There are no refunds for pre-paid service plans - however any remaining pre-paid service period is fully transferrable to another subscriber.

**To quickly and easily cancel your SafeGuardian Medical Alarm Emergency Monitoring Service, simply follow these three easy steps:**

- 1) Complete the Cancellation Request (below).
- 2) Mail your Cancellation Request. Be sure to enclose a check for any balance due to enable us to close your account. Send it to:

**SafeGuardian Medical Alarms  
Attn: Subscriber Cancellations  
825 College Blvd, Ste 102-310  
Oceanside, CA 92057-6263**

- 3) Email your Cancellation Request to: [service@safeguardian.com](mailto:service@safeguardian.com)
- 4) FAX your Cancellation Request to: 800-209-3814

**Important:** Please feel free use the shipping service most economical for you. For your protection, we STRONGLY recommend obtaining and keeping a tracking or delivery confirmation number from your shipping service. SafeGuardian is not responsible for lost or undelivered returns.

**Please Let Us Know How We Did!**

Please take a minute to provide your comments & suggestions about your experience using a SafeGuardian Medical Alarm System. Your experience is valued by our entire staff – and other families considering such a system - and is important as we strive to continuously improve our service.

Thank you!

SafeGuardian Customer Care

# SAFEGUARDIAN ACCOUNT CANCELLATION REQUEST

Date: \_\_\_\_\_

Hello SafeGuardian,

Please cancel the SafeGuardian monitoring account for the subscriber below:

Subscriber (User) Name: \_\_\_\_\_

Account Number (*If Available*): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Subscriber Phone: \_\_\_\_\_

- Please cancel my SafeGuardian service effective \_\_\_\_\_ (date).
- Check enclosed In the amount of \$ \_\_\_\_\_ for final payment.

Comments/Suggestions:

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Requested by:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_