

# FITNESS GYM

## INVOICE

Invoice Number:	10
Date:	26/10/2025
Member Name:	sdaas sad
Member ID:	3
Plan Name:	Fire
Amount Paid:	49.99 JOD
Payment Method:	credit

### Terms and Conditions:

1. This invoice confirms your membership subscription.
2. Membership is non-transferable and non-refundable.
3. Please retain this invoice for your records.

*Thank you for choosing Fitness Gym!*