



# Change of Address Form

**Instructions:**

Complete all fields below and sign this form to update your address. The form must be mailed, faxed, emailed, or dropped off at either location for processing.

PLEASE NOTE: You **must** complete one form for **each** membership you are the primary or joint owner of. **Only the address for the named member on the listed membership will be updated with this form.**

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Member Number: \_\_\_\_\_

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

Checking Account Number: \_\_\_\_\_

VISA Credit Card Number: \_\_\_\_\_

Debit Card Number: \_\_\_\_\_

Old Address: \_\_\_\_\_

\_\_\_\_\_

New Address: \_\_\_\_\_

\_\_\_\_\_

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

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

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

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

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**OFFICE USE ONLY:**

Staff: \_\_\_\_\_ Date Received: \_\_\_\_\_ Date Changed: \_\_\_\_\_