



## Change of Address Form

I, \_\_\_\_\_, authorize the following address change on all accounts in my name at VATAT Credit Union.

Member Name:

\_\_\_\_\_

Account Number:

\_\_\_\_\_

Last four digits of Social Security#:

\_\_\_\_\_

Old Address:

\_\_\_\_\_

New Address:

\_\_\_\_\_

Personal Telephone#:

\_\_\_\_\_

Work Telephone#:

\_\_\_\_\_

Primary Email:

\_\_\_\_\_

Secondary Email:

\_\_\_\_\_

Are there any other accounts in which you are a joint owner, such as for family members, whose addresses also need to be changed to the above?     Yes  No

If yes, please list names and account numbers:

Name:

\_\_\_\_\_

Account Number:

\_\_\_\_\_

Name:

\_\_\_\_\_

Account Number:

\_\_\_\_\_

Member's Signature:

\_\_\_\_\_

Date:

\_\_\_\_\_

***Please return form via mail, fax, or scan and email it.***

Received by (Signature of C.U. employee):

\_\_\_\_\_

Date:

\_\_\_\_\_

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