



# NAME AND ADDRESS CHANGES

1325 Oxford Drive • Allentown, PA 18103

(610) 791-2376 • Fax (610) 791-2900

Account #: \_\_\_\_\_

Member's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Joint Member's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Telephone (H): \_\_\_\_\_ (B) \_\_\_\_\_ (C) \_\_\_\_\_

## ADDRESS CHANGE

New Address: \_\_\_\_\_ APT #: \_\_\_\_\_

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

## NAME CHANGE \*PLEASE ATTACHED MARRIAGE CERTIFICATE OR DIVORCE DECREE

Name Changed to: \_\_\_\_\_

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

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

- THIS FORM CAN BE BROUGHT INTO ANY OFFICE, MAILED, FAXED OR EMAILED
- IF MAILED, FAXED OR EMAILED YOU WILL NEED TO HAVE THIS FORM NOTARIZED AND ATTACH A COPY OF YOUR PHOTO ID

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Credit Union Use Only

MasterCard to Parkway/Visa Check Card to East Side

Teller # \_\_\_\_\_