

CHANGE OF ADDRESS FORM

Note: Only a Primary or Joint account holder may change or update an account address or phone. Please list all accounts that you are the Primary or Joint owner of, that you wish to have changed or updated. Account not listed will NOT be changed.

Member Number(s): _____

Primary & Joint Name: _____

Password/Mother's Maiden Name: _____ Effective Date: _____

Note: GCEFCU required a physical address for our members. Post Office boxes cannot be accepted as the physical address. However, P.O. boxes may be used as a mailing address.

Physical Address:	_____	Mailing Address:	_____
	_____		_____
	_____		_____

Primary Member

Joint Member

Home Phone	_____	Home Phone	_____
Work Phone	_____	Work Phone	_____
Cellular Phone	_____	Cellular Phone	_____
E-Mail Address	_____	E-Mail Address	_____

Discontinue Paper Statements ___ Yes ___ No

Other Household memberships affected by address change (i.e. youth accounts) _____

Member Signature _____

Date _____

Member Signature _____

Date _____

FOR OFFICE USE ONLY

Staff Signature _____ Operator # _____ Date Completed _____