



P.O. Box 190
Caldwell, ID 83606 - 0190
(800) 635-0401 (208) 454-4286
Fax (208) 454 - 4394

Address Change Form

An address change form must be signed for every member who has moved whether they are the primary, joint or joint non-member. This is to insure that each person's information is updated as they wish, timely and accurately.

Note: To comply with US PATRIOT ACT requirements, if a PO Box is listed for a mailing address, a physical street address is also required.

Name (Primary)

Member Number

Name (Joint)

Member Number

Previous Address City State Zip Code

New Residential Address City State Zip Code

Mailing Address if different than above City State Zip Code

Home Phone Number

Current Employer (Primary)

Cell Phone Number

Current Employer (Joint)

Work Phone Number

Email Address

Seasonal/Alternate Address City State Zip Code

Seasonal address change only:

- Temporary (This Season only)
- Permanent (Reoccurring until further notice)

Alternate address change only:

Please provide the following information for only the account(s) to be changed.

This is for mailing purposes only.

Arrival Date

Account Type Account Number

Return Date

(1) _____

Seasonal Phone Number

(2) _____

(3) _____

Certification - Under the penalties of perjury, I certify that the information provided on this form is true, correct and complete.

Primary Member's Signature Date

Credit Union Use Only
Received By:
Maintained By:
___ Scanned and Attached to Member(s)
___ Debit ___ Credit ___ Letter

Joint Member's Signature Date