



Member Address Change Form

When you move, it is important that Alabama Teachers Credit Union moves with you!

Please fill out all information requested on the form. You may return the form by:

1. Dropping it by your local branch
2. Mailing it to: PO BOX 1400, Gadsden, AL 35902
3. Faxing it to: 256-543-7042

Address Change is for : Primary Account Owner Joint Account Owner

Account#(s) _____ Primary Account Holder Name _____

New Information

Address _____

County _____ Home Phone # _____ Cell Phone # _____

Work Info _____

Occupation _____ Work Phone # _____ E-Mail _____

Old Information

Address _____

County _____ Home Phone # _____ Cell Phone # _____

Work Info _____

Work Phone # _____ E-Mail _____

Please add the Names(s) and Account Number(s) of others in your household that require the same address change.

****Only applicable to joint owners on the same account as the primary or a minor account you are joint on.****

Name _____ Account# _____ F/M?

Name _____ Account# _____ F/M?

Name _____ Account# _____ F/M?

I, the primary account holder, wish to change my contact information. The information provided above to Alabama Teachers Credit Union is accurate. I understand should any of the above information change in the future I will immediately notify the credit union so that I will not be subject to any fees.

Primary Account Holder Signature _____ Date _____

Joint Account Holder Signature _____ Date _____

ATCU Representative Signature _____ Date _____

****PLEASE NOTE: Address changes will not be processed unless this form is signed and signatures have been verified.****

FOR CU USE ONLY

File Maintenance Performed by _____ Date _____

Changes Sent To:

Verified Signature Credit Card (Lindsey emailed: _____) Return Mail (Teresa emailed: _____)

Harland Clarke (Check Order Changed) IRA (Cynthia emailed: _____) Home Banking (Freida emailed: _____)

NOTES:

Secondary Maintenance: _____ Date _____