



## NOTIFICATION OF MEMBERSHIP CHANGE

Today's Date \_\_\_\_\_ Time \_\_\_\_\_ Clerk Initials \_\_\_\_\_

Name \_\_\_\_\_ MID # \_\_\_\_\_

Membership Type/Category \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # Day Time \_\_\_\_\_ Evening \_\_\_\_\_

Change you would like to make (please be specific):

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PLEASE NOTE: If you have a bank draft membership, changes to your account for the current month cannot be made after the 10<sup>th</sup> of the month. Change forms received after the 10<sup>th</sup> will be modified the next month.

**Please retain a copy of this for your records.**

Customer's  
Signature \_\_\_\_\_

For Office Use Only:  
Change made on:

\_\_\_\_\_