



Change of Mailing Address Form

(Today's Date)

(Member's First and Last Name)

(Member Number)

(Social Security Number)

Old Information (Required)

(Street Address, City, State, Zip)

(Phone Number)

(E-Mail Address)

New Information (Required)

(Street Address, City, State, Zip)

(Phone Number)

(E-Mail Address)

- Check here if you have an IRA Account.
- Check here if you have a Visa Debit/Check Card.
- Check here if you have a Visa Credit Card.

I would like this change to take effect as of _____.
(Date)

X _____
(Authorized Signature)

Please review the information above for accuracy, then sign. You may fax the signed form to 336.379.3506, mail it to Premier Federal Credit Union at PO Box 26590, Greensboro, NC 27415-6590, or stop by any Branch Location. The Credit Union must have this form hand delivered, mailed or faxed before your request can be processed. If this request is sent by fax, an employee of the credit union may contact you to verify the information before making any changes to your account.

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