



Address and Contact Information Change Request

Account Owner: _____ Member/Account #: _____

Street Address:

Address: _____

City: _____ State: _____ Zip: _____

Seasonal Address or P.O. Box: (for mailing purposes only)

Address: _____

City: _____ State: _____ Zip: _____

Contact Information: (if new)

Home Phone: _____ Cell Phone: _____

Business Phone: _____ Ext: _____ Other Phone: _____

Email Address: _____

Please change the address and/or mailing address to the address above for the following owner(s) or beneficiary(ies) on my account. (For a Primary Owner to change the address of a Joint Owner or Beneficiary, the previous address must be the same as the previous address of the Primary Owner unless the Joint Owner or Beneficiary is not the Primary Owner of any account at the Credit Union. The address of a Primary Owner can be changed at the request of the Joint Owner if all accounts are jointly owned by both individuals.)

Primary Owner: _____ Beneficiary: _____

Joint Owner: _____ Beneficiary: _____

Primary Owner Signature: _____ Date: _____

Joint Owner Signature: _____ Date: _____

(Internal Use Only)

I have confirmed the Joint Owner is joint on ALL products.

Zeal Credit Union Employee _____ Branch/Dept. _____ Date _____