



CHANGE OF ADDRESS

Should anything change – mailing address, email address, landline phone, cell phone – please let us know. As a financial institution, we send important documents to our Members. On other occasions we may need to contact you, or validate something with you by phone or email. To make sure all important information gets to you in a timely fashion, kindly let us know when *anything* changes in your contact information.

Member Info	
Account Number(s)	
Primary Member Name	Joint Member Name
Primary Email Address	Joint Email Address

OLD Address	Street		
City	State	Zip	

If a joint member requires a different address, please complete a separate form.			
NEW Address	Street		
City	State	Zip	
Mailing Address (If different from new address above)	Street/PO Box		
City	State	Zip	
Contact Info			
Home	Cell	Work	Fax

There is a 7-day waiting period before you may request check or credit/debit card replacements.	
Member Signature _____ (signature required)	Date _____
Joint Member Signature _____ (signature required)	Date _____

MAIL TO:
Community First CU
PO Box 6004
Santa Rosa, CA 95406-0004

Or drop by your favorite branch

OFFICIAL USE ONLY
Shares _____
Loans _____
Credit Card _____
Debit/ATM _____
Ck. Orders _____

