

# Change of Address Form

Complete this form and mail it to SELCCU to change your address  
 If you have any questions, please contact us.

**Account Numbers:** \_\_\_\_\_ **Primary Owner: Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
(SELCCU requires street address on file.)

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Optional: PO BOX mailing address:** PO BOX: \_\_\_\_\_ Mail will be sent to P.O. Box if filled in

**PO BOX:** City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Phone #'s Required** Cell Phone #: (\_\_\_\_\_) \_\_\_\_\_ Home Phone #: (\_\_\_\_\_) \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Work Phone#: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_ (Required for SELCCU Online & e-News subscribers.)

If you have an e-mail address, you will receive information on special events and promotions via e-mail, unless you opt-out by checking here.

**Primary Owner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Account Numbers:** \_\_\_\_\_ **Joint Owner: Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
(SELCCU requires street address on file.)

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Optional: PO BOX mailing address:** PO BOX: \_\_\_\_\_ Mail will be sent to P.O. Box if filled in

**PO BOX:** City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Phone #'s Required** Cell Phone #: (\_\_\_\_\_) \_\_\_\_\_ Home Phone #: (\_\_\_\_\_) \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Work Phone#: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_ (Required for SELCCU Online & e-News subscribers.)

If you have an e-mail address, you will receive information on special events and promotions via e-mail, unless you opt-out by checking here.

**Joint Owner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

(Required only if changing joint owner's address.)

**Children's Accounts** Child (ren) must be younger than 18 if being changed by parent or guardian.

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Name: \_\_\_\_\_ Account #: \_\_\_\_\_

**For Office Use Only**

File Date: \_\_\_\_\_ Message Off.: \_\_\_\_\_ ONLINE: \_\_\_\_\_ OPS: \_\_\_\_\_ CUSO: \_\_\_\_\_ HELOC: \_\_\_\_\_

Rec'd: \_\_\_\_\_ Mail Sent: \_\_\_\_\_ SHARES: \_\_\_\_\_ VISA: \_\_\_\_\_ IRA: \_\_\_\_\_ Marketing: \_\_\_\_\_