



Please print and sign this form, signature required to complete process.

You may scan this form and email to info@mtcu.org or Fax to: 432 689 0526

Change of Address

First Name.....	
Last Name.....	
Current Address.....	
City, State and Zip.....	
New Address.....	
City, State and Zip.....	
Account number.....	
Home Phone.....	
Cell Phone.....	
Email Address.....	
Confirm Email Address.....	

- This Form is my formal request to have the address I currently have listed on my account to be changed to the new address listed above. This applies to this account only/this applies to all of my accounts. **Please circle.**
- I hereby authorize MTCU to make this change on my account. I understand that my request will not be finalized until a callback from MTCU to the daytime contact # is completed. I understand that this safety precaution is to protect my identity.

Member Signature Daytime Phone # Date