



PO Box 30831
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FAFCU.org

PERSONAL INFORMATION CHANGE FORM

Members are encouraged to change personal information in digital banking. Alternatively, this form may be submitted by mail or in branch.

- Enter your name, account number, phone number, and today's date.
- Check the applicable box and enter any information that has changed.
- Specify all accounts that require updating. Only the primary account holder can change Personal Information.
- Sign in the grid and the blank box; include a copy of your valid U.S. government-issued identification (license, passport, ID).

Member Name (First, MI, Last)	Primary Account Number
Primary Phone Number	Today's Date

☐ **Change Phone Number** *By providing a mobile number, you're granting F&A Credit Union permission to place automated, prerecorded, or voice non-marketing calls and text messages to that number. Messaging and data rates from your carrier may apply. Message frequency may vary.

Current Phone Number	NEW Phone Number	* Mobile Phone? Yes ____ No ____
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☐ **Change Residential Address**

Current Residential Address, City, State, Zip Code	NEW Residential Address, City, State, Zip Code
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☐ **Change Mailing Address**

Current Mailing Address, City, State, Zip Code	NEW Mailing Address, City, State, Zip Code
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☐ **Change Email Address**

Current Email Address	NEW Email Address
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List all additional accounts that require updating:

Account Number	Account Number	Account Number	Account Number
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Member's signature required in the grid below in blue or black ink **AND** in the blank box. A copy of your valid U.S. government-issued Identification is **REQUIRED**. To protect your identity the Credit Union may contact you to verify the information on this form.

Primary account holder signature is required in the grid **AND** the blank box below.
