



Account Information/Address Change Request

650 Science Park Road, State College, PA 16803 Ph: (814) 237-5458 Fax: (814)231-6607
 2601-A East College Ave, State College, PA 16801 Ph: (814) 238-9619 Fax: (814)238-9649
 9902 Shaner Blvd, Huntingdon, PA 16652 Ph: (814) 643-7910 Fax: (814)643-9236

I authorize Arize Federal Credit Union to make and accept the following changes to my account(s):

Member Account Number(s)			

Type of Change (Please indicate the type of change and complete only the information that applies to the requested change.)

Account Owner Information Change **Joint Owner Information** Change Account

New Information

Member/Owner _____ **SSN** _____
Street _____ **City/State/Zip** _____
Home Phone _____ **Work Phone** _____
Date of Birth _____ **Driver's License Number** _____
Email Address _____

Previous Information

Member/Owner _____ **SSN** _____
Street _____ **City/State/Zip** _____

I agree that the above changes amend the previously signed Account Card and are subject to the terms and conditions of the Membership and Account Agreement, Truth in Savings Rate and Fee Schedule, and Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested above. If an access card or EFT service is requested and provided, I agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement. I certify that the information provided above is my true and correct identity information.

Signed _____
 Member/Owner/Joint Owner Date

 To be notarized if unable to appear in person at a branch.

State of _____, County of _____

This person named hereon personally came before me and signed above on this the _____ day of _____, 20_____.

My commission expires on _____, 20_____.

 Notary Signature

 Printed name (stamp)

For Office Use Only (Staff initial): Received by _____ Date Received _____

_____ Debit/ATM Card _____ Credit Card _____ Account _____ IRA's _____ e-Statement _____ Bill Payer