



Member Change of Information

Please use this form to notify the credit union of any changes to your personal information. When completed, please sign where indicated.

MEMBER NAME:	
ACCOUNT NUMBER(S) AFFECTED BY THIS CHANGE REQUEST:	
PHYSICAL ADDRESS:	
MAILING ADDRESS: (If different than above)	
CELL/HOME PHONE:	
WORK PHONE:	
EMAIL ADDRESS:	
MEMBER SIGNATURE:	
CU EMPLOYEE:	
DATE:	

Please select any of the additional services/products that you currently have with us:

Bill Pay **Credit Card** **IRA/HSA** **Student Loan**

If you have any questions, please contact your local branch office or call 800.749.9732. Please turn in this form to your local branch office or you can send it to our main office:

Greater Texas Federal Credit Union
6411 North Lamar Blvd. Austin, TX 78752-4088
Fax: (512) 929-8552