

# Personal Information/Address Change Form

- Please be sure to sign and date in section 4 on reverse side
- Please print clearly in black ink only and initial any changes to this form
- Non-U.S. Citizens or U.S. Persons (including U.S. Resident Aliens) must submit IRS form W-8BEN

Member Account Number \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

## 1 Account Information

I would like to update the following information on my Alliant account(s):

- Member name change and signature (Please include a copy of your marriage certificate, divorce decree, government issued driver's license or court ordered name change.)

**New Name:**

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

- New SSN or ITIN \_\_\_\_\_

- Social Security Number change requires submitting IRS form W-9
- Please submit a copy of social security or ITIN card

- New Email Address \_\_\_\_\_

- New Home Phone Number \_\_\_\_\_

- New Cell Phone Number \_\_\_\_\_

- New Work Phone Number \_\_\_\_\_

- Date of Birth \_\_\_\_\_

- Mothers Maiden Name \_\_\_\_\_

- New Password \_\_\_\_\_

- Change of Address (*This change of address will also be made to all of your associated accounts with the member number provided above including your Visa® credit card, if applicable. A separate form must be submitted for each account that you are a Joint Owner on.*)

- Primary Address     Secondary Address     Joint Owner Address

**Previous Address:**

Street Address (include unit #) \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_

**New Address:**

Street Address (include unit #) (no PO Box if primary address) \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_

**continued on reverse** 

## 2 Employment Information (required)

- Employment Status:  Employed  Homemaker  Retired  
 Self-employed  Student  Unemployed

Occupation-if retired, previous occupation \_\_\_\_\_

Employer Name-if student, school name \_\_\_\_\_

Employer/School City, State and Country \_\_\_\_\_

## 3 New Cards and Checks

- **Visit Alliant Online Banking if you would like to order new checks reflecting your new name and/or new address. Note:** *You will be responsible for the purchase price of the checks.*
- **If you currently have a Visa® credit card, Visa® debit card and/or Convenience card, would you like a replacement card reflecting your name change? Note:** *Cards will be mailed to the primary address on record for the Member.*

**YES NO**

- Visa® credit card** – available to current cardholders only
- Visa® debit card** – available to current cardholders only
- Convenience card** – available to current cardholders only

## 4 Signature

**X**

Member Signature (required) \_\_\_\_\_

Date \_\_\_\_\_

**MINOR ACCOUNTS:** If member is a child under the age of 12, a parent or guardian must sign the child's name and their own name and date (i.e. "John Smith, a minor, by parent, Mary Smith").

**Important:** To avoid processing delays, Non-U.S. Citizens or U.S. Persons (including U.S. Resident Aliens) should complete and return a W-8BEN form (available at [alliantcreditunion.com](http://alliantcreditunion.com)) with your completed Personal Information/Address Change Form.

FOR OFFICE USE ONLY:

**1 Processing:** Teller ID \_\_\_\_\_ Branch/Dept. \_\_\_\_\_ Date \_\_\_\_\_

**2 Imaging:** Forward to Imaging (All fields in step 1 must be completed prior to Imaging.)

### COMPLETE FORM AND RETURN:

- Stop by an Alliant Branch, or mail to:  
Alliant Credit Union  
Attn: Account Services  
PO Box 66945  
Chicago, IL 60666-0945
- Fax to: 773-462-2124

### FOR MORE INFORMATION:

Call 800-328-1935 (24/7)  
TDD/TTY 773-462-2300  
(Mon.–Fri., 7am to 7pm CT)



PO Box 66945, 11545 W. Touhy Avenue  
Chicago, IL 60666-0945  
[alliantcreditunion.com](http://alliantcreditunion.com)



**Federally insured by  
NCUA**