



**Workmen's Circle Credit Union**  
527 Stephenson Avenue, Suite 1, Savannah, GA 31405  
Tel: 912-356-9225 | Fax: 912-356-9226  
workmenscirclecu.com

## Change of Address Form

Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

### New Address

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Work No: \_\_\_\_\_ Home No: \_\_\_\_\_

Effective Date: \_\_\_\_\_

I hereby authorize Workmen's Circle Credit Union to change the mailing address on my account as instructed above.

**Signature:** \_\_\_\_\_

For the protection of our members, all address changes must be submitted in writing. Verbal requests will not be accepted. All Address requests are subject to verification by Workmen's Circle Credit Union.

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### For Credit Union Use Only

File Maintenance Performed Date: \_\_\_\_\_ Initials: \_\_\_\_\_

**\*If this member has an IRA (Ascensus) or Loan Investor Account (Email Donna), please change appropriate systems.**

Date: \_\_\_\_\_ Initials: \_\_\_\_\_