



Address and Phone Number Change Form:

Please complete, sign and return this change request form to the Two Harbors Federal Credit Union or mail to: 801 11th Street, Two Harbors, MN 55616. Allow 3-5 Business Days for your request to be processed.

Member/ Business Name: _____

Account Number(s): Please remember to include all applicable account numbers. i.e: spouse and children. Only the account numbers listed will be changed and you must be an authorized signer on the account.

Account Number: _____

Account Number: _____

Account Number: _____

Account Number: _____

Mailing Address and Phone Numbers-If Mailing address is a PO Box, you must provide a physical address in the alternate address section below.

Choose One: ☐ Change effective immediately ☐ Change effective on ____/____/____.

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Physical Street Address- This section is only **REQUIRED** if using a PO Box Mailing

Address

Address: _____

City: _____ State: _____ Zip: _____

I hereby acknowledge that the information I have provided is correct and that I am authorized to amend the information for the account(s) listed above.

Member/Authorized Signer/Signature **X** _____

Printed Name: _____ Date: _____

CREDIT UNION USE
ONLY

Address change received: ☐ in person ☐ By Mail ☐ Other _____

Date address changed: _____ ☐ FSP ☐ Credit Cards ☐ Debit Cards ☐ IRA's

Request taken by _____ Teller Number _____