



Change of Address Form

PLEASE PRINT CLEARLY

Primary Member Name

Primary Account Number

Joint Owner Name

So we accurately update all of your files, check any of the following RiverLand services that you have:

List Additional Account Numbers

Credit Card **IRA** **HSA**

Old Address

New Physical Address

New Mailing Address (if different from physical address)

Updating your contact information is required before we can process your address change:

(_____) _____
Home Phone

(_____) _____
Work Phone

(_____) _____
Cell Phone

(_____) _____
Pager

Home E-Mail Address

Work E-Mail Address

Member Signature

Date

For Credit Union Use Only:

Share _____ Date IRA _____ Date HSA _____ Date

M/C Gold _____ Date M/C Standard _____ Date M/C Corporate _____ Date

Deliver, mail, or fax this form to RiverLand Credit Union:

639 Loyola Avenue Suite 220 • New Orleans, LA 70113 • L-ENT-RCU
504-576-5800 • 800-586-4RCU • Fax 504-576-5805 • UDC 8-576-5800