



It's deeper here.®

Membership Change Form

Today's Date: _____

Primary Member Name: _____ Phone #: _____

Current membership type: Adult Two Adult Family One Adult Family
 Senior Senior Family Young Adult Youth

The information below is the information I would like to change:

_____ Change Membership type to: Two Adult Family One Adult Family

*MUST ALSO

Senior Family

COMPLETE

Youth (Name: _____)

EFT FORM*

Adult (Name: _____)

Senior (Name: _____)

_____ Change EFT/credit card info: _____

_____ Change Primary Member to: _____

_____ Change Address to: _____

_____ Change Phone Number to: _____

_____ Delete Family Member: *(only if they no longer live in the household)*

Name: _____

_____ Add Family Member: Name: _____

Birth date: _____ Gender: M / F (circle one)

_____ Change Emerg. Contact to: Name: _____

Phone: _____

Relationship: _____

**Please note the membership definitions before changing membership type and/or adding & removing family members.*

*** This change form also takes 30 days to process and in some cases there may be a Gap Fee due.*

Member Signature: _____ Date: _____

Office Use Only: Member #: _____ MSR Initials: _____
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