

CHANGE NOTICE

USE THIS FORM FOR CHANGES TO EXISTING MEMBERSHIP RECORDS

Name, Last	First	Rec. Card No	Exp. Date
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DATE: ____/____/____

Street Address

Monitor - Fill in Member's name then *only* fill in the information that has changed. Explain any other changes.

Sun City, AZ	ZIP	+	Phone No.
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E-Mail Address

Upon completion, deposit this form in the Membership Chairpersons slot.

Explain any other Changes:

Monitor: _____



Computer Club of Sun City