

Name Change



Revised: 02.22.2017

Account Number:			
Name Change:	Print Former Name:	Print New Name:	
	Please accompany this completed form with a copy of a Marriage Certificate, updated driver's license or other court documents reflecting the legal name change.		
	Signature (New Name):		Date:

By signing above, I authorize Southwest Colorado Federal Credit Union change my name on the above referenced account, as described on this form. I have included a copy of the document that reflects this legal name change in addition to this form.

Instructions:

- Please provide the Credit Union a copy of a Marriage Certificate, updated driver's license or other court documents reflecting the legal name change
- **Return via fax (970-247-8784), mail (15 Bodo Drive, Durango, CO 81303) or secure email (link on our "Contact Us" webpage – DO NOT SEND THROUGH REGULAR EMAIL AS IT IS NOT SECURE).**

FOR CREDIT UNION USE ONLY:	Date:	Name Change Docs: <input type="checkbox"/>	Initials:
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