



# Name Change Request Form

Member Number \_\_\_\_\_

Current Member Name \_\_\_\_\_

*I hereby authorize the MIT Federal Credit Union to make the following change(s) to my name on my account.*

Please change my name from \_\_\_\_\_

to \_\_\_\_\_

Please update and reorder the following products after this change has been processed

Debit MasterCard          Visa Credit Card

ATM                          Checks

*If you are ordering checks please indicate below what information you would like on your checks.*

Name \_\_\_\_\_

Joint Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Please indicate what type of checks you wish to order

Single Style (free if you are a Smart Money Rewards Member)

Duplicate Style (will be charged to your MITFCU checking account)

Other Style \_\_\_\_\_

Signature \_\_\_\_\_

Please include a copy of your marriage certificate or legal court document.