



70 Westview Street  
 Lexington, MA 02421  
 617-253-2845  
 www.mitfcu.org

## ACCOUNT TITLE CHANGES

**Current Name:** \_\_\_\_\_ **Member Number:** \_\_\_\_\_

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

**Updated Name:** \_\_\_\_\_

**Please update and/or reorder the following products after this change has been processed:**

- Debit Mastercard®     ATM Card     Checks

For **check** reorders, please indicate below how your information should appear on your new checks:

Primary Owner Name		
Joint Owner Name (if applicable)		
Street Address		
City	State	Zip Code
Phone Number (if desired)	<b>IMPORTANT:</b> Joint owners cannot be removed from an account once they have been added.	

**Please indicate the type of checks you wish to order:**

- Single Checks     Duplicate Checks     Other: \_\_\_\_\_

*Check order fees will be charged to your MIT FCU checking account.*

\_\_\_\_\_  
**Member Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**

**NOTE:** Please include a copy of any applicable legal documentation verifying your name change.