

Address Change Notification

This form has “fillable fields”: Type the information in the appropriate places and save the filled-out form; your information will be included.

Send the form as an attachment, to webmaster@wacci.net

Name: _____

Click the box if you are returning to town and you had notified us of your departure. In that case you do not need to fill out the New Address information, because we have your local address on file.

Date of address change: _____

This is the date of my:

- Departure
- Return
- Permanent Move

New Address

Street and number _____

Town _____ State (2 letters) _____

Zip _____