

Change of Address Request

Name: _____

Account Number: _____

Old Address Information

Address: _____

City: _____ State: _____ Zip Code: _____

New Address Information

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Cell Phone: (_____) _____ Fax #: (_____) _____

Download this form using Acrobat Reader. Print form, complete, sign, date and submit the request to the Credit Union by fax, mail or in person.

Winchester Industrial Federal Credit Union

P O Box 1906

1700 South Loudoun Street

Winchester, VA 22604

Phone: (540) 662-5557

Fax: (540) 722-3696

Toll Free: 1-888-411-0591