

MEMBER CHANGE FORM

Keep your information current with GLAR. Complete this form for changes to your name, address, telephone or email address.

Please check type of change req Change of Name (attach copy		
$oxedsymbol{\square}$ Change Preference of Mailing	(i.e. via mail, fax or email)	
Change of Home Address		
☐ Change of Phone Number, E-m	ail Address or Fax Number	
	OLD INFORMATION	
Last Name	First Name	U 12464
Home Address		T THE
Home Phone	Home Fax	7
Email Address		
N	IEW INFORMATION	
Last Name	First Name	10 100
Home Address		
Home Phone	Home Fax	7-90
Email Address		