

Communication Workers of America Local 2100

MEMBER CHANGE OF ADDRESS FORM

Brothers and Sisters, we want you to continue to receive our quarterly newsletter as well as other important information from your Local. When you have a change of address, please let us know. Be sure to include your old address and please don't forget to include your work location and job title. This information is helpful in checking and keeping our records straight. You can also update your information on our website at <http://www.cwa2100.org/>.

Please complete all applicable information below

NEW ADDRESS INFORMATION			
Last Name	First Name	Middle	Suffix
New Street Address			
City	State	Zip Code	
Home Phone		Cell Phone (Personal)	
Would you like to receive Union Information via E-Mail? [] Yes [] No			
Email Address:			

OLD ADDRESS INFORMATION		
Old Street Address		
City	State	Zip Code
Home Phone		Cell Phone (Personal)
Former Local		Former Location

COMPANY INFORMATION		
Work Location	Job Title	Company Phone #
1 st Level Supervisor		Phone #
2 nd Level Supervisor		Phone #

TO BE COMPLETED BY THE LOCAL OFFICE ONLY	
Date Received By Local:	Info Recorded By:
Remarks:	

This Change of Address form can also be mailed or faxed to:

CWA Local 2100
 P.O. Box F
 Chase, MD 21027
 (410) 335-2100

 (410) 335- - fax