



CHANGE OF NAME

This form is to record your legal name change. Please attach the proper documentation that is listed in Step 2.

STEP 1: Your Personal Information

Print your FORMER name in full

- Mr Ms Mrs Miss

First Name Middle Last Name Date of Birth (mm/dd/yyyy)

Street Address City State Zip Code

Print your NEW name in full

- Mr Ms Mrs Miss

First Name Middle Last Name

Street Address (if different from above) City State Zip Code

Home Phone Mobile Email

Check the reason below for your name change. Attach a copy of the listed documentation to this form. Do not send originals.

- Marriage: Marriage certificate
Court Order: Court order
Divorce: Divorce decree and property settlement agreement
Spouse is Deceased: Death certificate

STEP 3: Signature

Sign below using your new name.

YOUR SIGNATURE

Social Security Number boxes

STEP 4: For Local Plan Administrators, YERDI Users, and Y Officers Only

If you are a Local Plan Administrator for your Y, other YERDI user, or an officer at your Y (CEO, CFO, CHRO, etc.), please check this box. The Fund will also update your name in these corresponding systems.

