

This form is to record your legal name change. **You must submit a copy of your Social Security Card showing your updated name.** This form may not be valid unless it is completed without erasures or alterations. If you elect to submit this form by mail, send the original completed and signed form with copies of supporting documents to the address below (keep a copy of the form for your records). **To submit this form and supporting documents electronically, log in to your account at www.yretirement.org and go to Document Uploader under Account Services.**

STEP 1: Your Personal Information

Print your **FORMER** full name:

First Name	Middle Name	Last Name	Date of Birth (mm/dd/yyyy)
<hr/>			
Street Address	City	State	Zip Code
<hr/>			

Print your **NEW** full name:

First Name	Middle Name	Last Name
<hr/>		
Street Address	City	State Zip Code
<hr/>		
Home Phone	Mobile	Personal Email
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STEP 2: Reason for Name Change

Please choose one of the following reasons below for your name change. You must submit a copy of the corresponding document listed next to the selected reason below, **in addition to your Social Security Card showing your updated name.** Do not send originals to the YMCA Retirement Fund.

- ☐ **Marriage:** Marriage Certificate
- ☐ **Divorce:** Divorce Decree
- ☐ **Court Order:** Court Order

STEP 3: Signature

Sign below using your new name:

I certify that the information on this form is true, complete and accurate.

YOUR SIGNATURE 

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Social Security Number				

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.