

Use this form to update your legal name and contact information on your BECU accounts, and replace existing debit/ATM card and/or checks. You need to provide proof of your legal name change.

Account holders 17 years of age or younger require the signature of a parent or guardian who is on the account.

Step 1. Your information on file							
Former Full Name (as currently appears on your account)							
Date of Birth	of Birth SSN/TIN (9 digits)		Moth				
Step 2. Updated information							
Information provided v	vill replac	ce existing inf	forma	ition on file.			
New Full Name (must match proof of name change documents)							
Street Address (physical address required)							
City	State/Provin		ce ZIP/Postal Code		Country		
Mailing Address (if different than above)							
City		State/Province		ZIP/Postal Code	Country		
Email Address			Phone		Phone type Home Mobile		
ID Type			Issue Date		Expiration Date		
ID Number			State Issued		Country Issued		
Employment Status							
Employed Self-employed Retired Unemployed Never Employed							
Employer (current or previous if not employed) Occupation (current or previous if not employed)							

Step 3. Debit/ATM card replacement Reissue all current ATM/Debit cards with my updated name Current card(s) will continue to work until the new card(s) are activated. Note: If your legal name is longer than the space available, it will be truncated to 12 characters for your first name and 17 characters for your last name, up to a total of 26 characters. Step 4. Order checks Order checks (checking or Money Market) • For information about check designs and prices, visit <u>Deluxe</u>. • The **cost of the checks** will be debited from your checking account. Specify check details **Check Design** Check Quantity BECU exclusive design (lowest cost, duplicate style) Mini-Pak 25 (if available) Other design name) Box 100 () BECU Exclusive Money Market (quantity may (no cost – only for money market accounts, Mini-Pak 40) vary by design) Starting check number: Checking account number Information to print on new checks (check all that apply) Primary Account Holder Name | Address Phone Number Joint Account Holder Name (1) Joint Account Holder Name (2)

Step 5. Proof of legal name change

Attach/provide a photocopy of **all** the following documents:



Documents Required

- · Valid picture ID with new name
- Picture ID with former name (if available)
- Certified Copy of court-ordered documents (e.g., marriage certificate, divorce decree, name change order), or Social Security card with new name (front & back)

Step 6. Agreements

- Debit/ATM Card Orders. If you ordered a debit and/or ATM card, you are expressly requesting us
 to issue such card(s) to you.
- **2.** Check Orders. By requesting checks, you authorize BECU to debit the cost of the checks from your Checking Account at the time of the check order.
- **3. Marketing.** By providing your email address, you agree that BECU may send marketing material to you electronically.
- 4. Telephone Consumer Protection Act.
 - BECU and its service providers may contact you for non-marketing purposes at any telephone number you provide. BECU may use automated telephone dialing, text messaging systems, and electronic mail to contact you.
 - The telephone messages are played by a machine automatically when the telephone is answered and may be recorded by your answering machine. Standard data and message rates may apply, and you agree that BECU will not be liable for such fees.
 - You agree to update us promptly when your telephone number changes. At any time, you may
 update such information or revoke your consent to receive non-emergency calls or text
 messages at a telephone number assigned to a wireless device (or any service that charges
 on a per-call basis) by contacting us at 800-233-2328 or other reasonable means.

Step 7. Acknowledgment and consent

By signing below, I certify that I have read, understand, and agree with the above agreements. Further, I personally verified and confirmed that all information provided and displayed in this form is accurate, complete, true, and submitted for the purpose selected above. I understand that BECU will rely on such information in BECU's dealings with me.

Signature	Printed Name	Date (mm/dd/yyyy)
Parent or Guardian Signature*	Printed Name	Date (mm/dd/yyyy)

^{*}Required for signers 17 years of age or younger

If form is not submitted electronically, please return all pages, completed and signed, along with copies of the documents listed above, to:

BECU; Attn: Account Servicing M/S: 1094-2; PO Box 97050; Seattle, WA 98124-9750

BECU Only					
Employee		Location	Location		
ID Verified	OFAC on New Name	Person Number	Date (mm/dd/yyyy)		