



# Change of Address Form

Aboriginal Culture and Resource Centre



I \_\_\_\_\_  
(Full Name of Member)

Of \_\_\_\_\_  
(NEW Address of Member)

Contact \_\_\_\_\_  
(Email of Member)

I am a member of the corporation and I appoint,

\_\_\_\_\_  
(Name and Address of Member)

Would you like to be on our mailing list?

Yes

No

**Signature**

**Date**

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(Name and Address of Member)

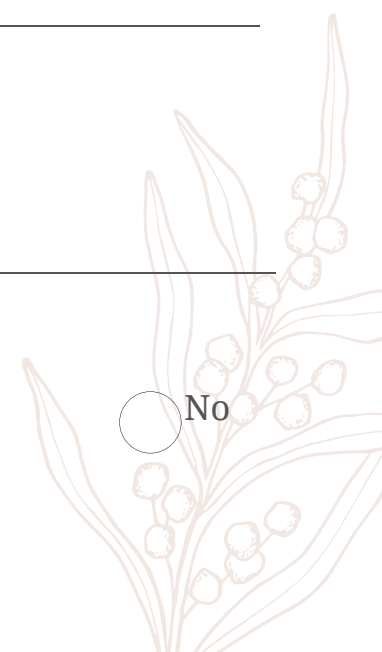
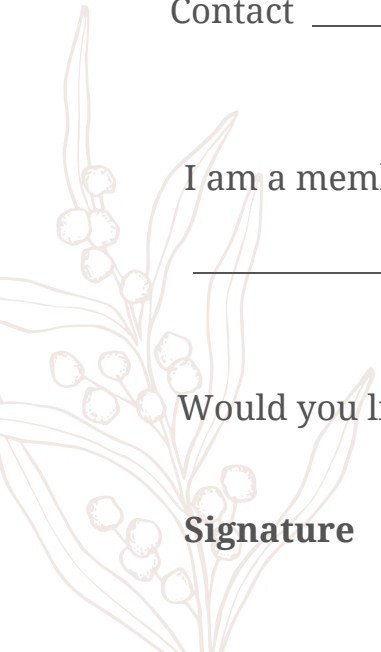
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