



Change of Address or Name Form

Please check all that apply: ☐ Change of Address ☐ Change of Name

Full name (first, middle, last, suffix): _____

Are you Head of Household? ☐ Yes ☐ No

Last 4 Digits of Social Security Number: _____ Date of Birth (MM/DD/YYYY): ____/____/____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Enrolled to: ☐ Cantwell ☐ Chistochina ☐ Copper Center ☐ Chitina ☐ Class L
check all that apply
☐ Gakona ☐ Gulkana ☐ Mentasta Lake ☐ Tazlina ☐ Ahtna Only

Use Section Below for Change of Address

New Address: _____ Old Address: _____

Signature: _____ Date: _____

List names of any additional Ahtna shareholders (including the last 4 digits of their social security numbers AND their dates of birth) that the change of address will affect. If any are over 18, their signature is also required. Use additional sheets if needed:

First and Last Name _____ Last 4 Digits of SSN _____ DOB (MM/DD/YYYY) _____

Signature (if over 18) _____

First and Last Name _____ Last 4 Digits of SSN _____ DOB (MM/DD/YYYY) _____

Signature (if over 18) _____

First and Last Name _____ Last 4 Digits of SSN _____ DOB (MM/DD/YYYY) _____

Signature (if over 18) _____

Use Section Below for Change of Name

Old Name: _____

New Name: _____

IMPORTANT: Before we can change your name, you must submit documentation verifying that your name has indeed changed (e.g. marriage certificate, court order, etc.) or provide a valid form of identification containing your new name (e.g. passport, drivers license, etc.). Documentation must accompany this form; name changes will not be processed without verification.

Signature: _____ Date: _____