## **CHANGE OF NAME/ADDRESS FORM**

THE IZAAK WALTON LEAGUE OF AMERICA, INC.
NATIONAL OFFICE

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DATE	DIVISION AND CHAPTER NUMBER

CHAPTER NAME

NAME AND TITLE OF OFFICER

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Address (Street, Apt., P.O. Box)	Address (Street, Apt., P.O. Box)
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PHONE NUMBERS (HOME/WORK)	PHONE NUMBERS (HOME/WORK)
Fax, E-Mail	FAX, E-MAIL
OLD NAME/ADDRESS	NEW NAME/ADDRESS
Мемвеr ID #:	JUST RECORD CHANGED PORTIONS OF NAME OR ADDRESS
Name	NAME
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PHONE NUMBERS (HOME/WORK)	PHONE NUMBERS (HOME/WORK)
FAX, E-MAIL	FAX, E-MAIL
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