

TBQ MEMBERSHIP CHANGE REQUEST FORM

Please COMPLETE ALL of the appropriate information and RETURN THIS FORM TO THE MEMBERSHIP TABLE. *Thank You!*

NAME: _____

CHANGE(s) REQUESTED:

ADDRESS

TELEPHONE

E-MAIL

NAME

PLEASE PRINT ANY INFORMATION YOU WANT TO CHANGE IN THE DIRECTORY (AND WRITE BIG ENOUGH SO I DON'T HAVE TO WEAR MY GLASSES TO READ IT).