Change of Address

Name:	
Address will change as of (date):	
Former Address	New Address
Street:	Street:
City & State:	City & State:
ZIP code:	ZIP code:
Updating your address with the Local 492 office <u>WILL NOT</u> update your address with the IATSE National Benefits Office. Please contact them directly at 1-800-456-FUND or <u>www.iatsenbf.org</u> to update your address in their files. FORM MUST BE SUBMITTED WITH AN UPDATED COPY OF YOUR DRIVER'S LICENSE SHOWING THE UPDATED ADDRESS. Please Update if Changed	
Email:	
(Please be sure to update your account at <u>www.mailchimp.com</u> to continue to receive newsletters)	
	T
Home Phone:	
Cell Phone:	
Website:	
Other:	

Please submit complete forms to the Local 492 office at:

iatse492@comcast.net

-or-

IATSE Local 492 310 Homestead Road Nashville, TN 37207