

# SEATU HOME ADDRESS FORM

*(Please print)*

NAME: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

LAST FOUR DIGITS OF SSN: \_\_\_\_\_

This will be my permanent address for all official union mailings. This address should remain in the union file unless otherwise changed by me.

Signature/date:

\_\_\_\_\_

**UW Please send to: SEATU, Address Correction Dept., 5201 Auth Way, Camp Springs, MD 20746**