

Church Membership Update

Name	Phone
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Home address

City	State	ZIP code
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Customer Information File number (CIF) or Social Security number **(required only if new address)**

Update Church Information

Church name

Street name (required)

City	State	ZIP code (if known)
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List the name of each person in your household to whom this change applies.

By signing this document I understand and agree that I am requesting my church membership information, and those I've listed, to be updated.

Signature	Date
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Sign and mail to:
Thrivent Financial for Lutherans
Relationship Information
4321 N. Ballard Road
Appleton, WI 54919-0001