New Jersey Division

International Association for Identification

Change in Member Information

Membership Name: _____ Member Number: _____

Change in Name: As it is to appear in the Membership Directory

New Name: _____ _____ _____

First Middle Last Name

Change in Employer Information:

New Employer: _____

New Work Address: _____

City: _____ State: _____ Zip: _____

New Telephone: _____ Ext: _____

New Work Email Address: _____

Change in Home Address, Phone Number, or Email Address:

New Home Address: _____

City: _____ State: _____ Zip: _____

New Home Telephone: _____ New Cell Phone: _____

New Home Email Address: _____

Please complete form and do one of the following:

Email to: VP3@njiai.org

Mail to: PO Box 423

New Milford, NJ 07646

Revised 3/15/2024