

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 Dir	rectory
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 Numbe New Home Address:		
City:		
New Home Telephone:	New Cell Phone:	
New Home Email Address:		
Please complete form and do one of the fo	ollowing:	
Email to: N.IdivisionIAI@gmail co	ım	

New Milford, NJ 07646

Mail to: PO Box 423