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| **Jaguar Clubs Of North America, Inc.**  **Membership Change-Update Info Form**  **Use for Name / Address / Phone Number Changes**  **& Member Reactivation / Deactivation** | | | | | | | |  | jcna color logo in a box | |
| Region: |  | | Club Number: | |  | Club Name: |  | | |
| Person Submitting Form: | | | |  | | | | | |
| Send to: | | JCNA Administrator, 500 Westover Dr. #8354. Sanford, NC 27330  Phone: 888-258-2524. Ext.1 (Toll Free), e-mail: Admin@JCNA.com | | | | | | | |

**Changes:** For clarity please fill in all block’s, check the  in appropriate blocks to indicate information has changed. **Member Reactivation:** Often members are deleted from the Annual JCNA Roster Update due to indecision or non-payment of dues. JCNA keeps a Deactivated member’s record in the Roster Data Base for 1 year. Use this form for Reinstatement during the remainder of the current year.

**INSTRUCTIONS:** You may use your computer and press the **Tab** key to move between fields or you may print this form and fill it out by hand, please print legibly, and send it to the address above.

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| **C****omplete this entire line. Be sure to give the Before Change names.** | | | | | | | | | | | | | | | MAKE CHANGES  REACTIVATE MEMBER  DEACTIVATE MEMBER | | |
|  | | | | | | | | | | | | | | |  | | |
| MEMBER NUMBER | |  | | MEMBER NAME | | | |  | | | | LAST NAME | |  | | | |
| Member First Name | | |  | | | | Last name | |  | | | | | | Co-Owner/Spouse | | |
| Address |  | | | City |  | | | | | State |  | | | | Zip |  | |
| Country |  | | | Home Phone | |  | | | | Business Phone | | |  | |  | |  |
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| MEMBER NUMBER | |  | | MEMBER NAME | | | |  | | | | LAST NAME | |  | | | |
| Member First Name | | |  | | | | Last name | |  | | | | | | Co-Owner/Spouse | | |
| Address |  | | | City |  | | | | | State |  | | | | Zip |  | |
| Country |  | | | Home Phone | |  | | | | Business Phone | | |  | |  | |  |
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| MEMBER NUMBER | |  | | MEMBER NAME | | | |  | | | | LAST NAME | |  | | | |
| Member First Name | | |  | | | | Last name | |  | | | | | | Co-Owner/Spouse | | |
| Address |  | | | City |  | | | | | State |  | | | | Zip |  | |
| Country |  | | | Home Phone | |  | | | | Business Phone | | |  | |  | |  |
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| MEMBER NUMBER | |  | | MEMBER NAME | | | |  | | | | LAST NAME | |  | | | |
| Member First Name | | |  | | | | Last name | |  | | | | | | Co-Owner/Spouse | | |
| Address |  | | | City |  | | | | | State |  | | | | Zip |  | |
| Country |  | | | Home Phone | |  | | | | Business Phone | | |  | |  | |  |
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