



# Personal Information Form

It is your responsibility to keep your correspondence preferences, mailing address/email address up to date with Contract Services.

☐ Initial Personal Information      ☐ Name Change

Print all information completely and legibly in ink.

| Personal Information: |                                       |      |
|-----------------------|---------------------------------------|------|
| Legal First Name:     | Legal Middle Name:                    |      |
| Legal Last Name:      | Suffix ( <i>Jr., Sr., II, etc.</i> ): | SSN: |

| Name Change Only: ( <i>Enter previous legal name</i> )   |  |  |
|--|--|--|
| <i>A copy of a state, county or federally issued document (e.g., driver license, passport, marriage certificate, name change decree, etc.) is required to substantiate your requested name change.</i> |  |  |
| Previous First Name:   | Previous Middle Name:                          |  |
| Previous Last Name:  | Previous Suffix ( <i>Jr., Sr., II, etc.</i> ): |  |

| Local/Classification: |                     |
|-----------------------|---------------------|
| Union/Guild #:        | Job Classification: |

| Personal & Contact Information:          |                                     |   |
|--|-------------------------------------|---|
| Mailing Address:                         | Unit # ( <i>Apt., Ste., etc.</i> ): |   |
| City:                                    | State:                              | ZIP Code:                                 |
| Country ( <i>if not United States</i> ): |                                     |   |
| Cell Phone:                              | <input type="checkbox"/> None       | Home Phone: <input type="checkbox"/> None |
| Emergency Contact Name:                  | Emergency Phone:                    |   |

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Return this form via email to [reception@csatf.org](mailto:reception@csatf.org), in person, by fax or mail.

**Contract Services**  
2710 Winona Avenue  
Burbank, CA 91504

**Phone Number:** 818.565.0550 extension 1100  
**Fax Number:** 818.565.0535

