



Member Information Update

Your full name (*please print*): _____

Last 4-digits of Social Security Number: _____

(Optional; helps to correctly identify your file)

***Check all items that apply to your update:**

- Address change
- Phone number change
- Email address change or addition
- Change my membership to this local unit:

***Enter your old address (*Please print*):**

***Enter your current contact information (*Please print*):**

Full mailing address: _____

Home phone number: _____

Cell phone number: _____

Email address: _____

Please complete this form and mail to

NC Retired School Personnel
Attn: Member Update
700 S. Salisbury St.
Raleigh, NC 27601

Alternatively, you may submit this information via E-mail to ncrsp@ncrsp.org. Please use the subject line "Member Update."

*Required for processing