



**YMCA - YWCA of
Guelph**

CHANGE OF ADDRESS FORM - Child

Child(ren)'s Name: _____

Centre: _____

New Information

Home Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Cell: _____



**YMCA - YWCA of
Guelph**

CHANGE OF ADDRESS FORM - Payer

Child(rens)'s Name: _____

Payer's Name: _____

New Information

Home Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Cell: _____