Benefit Trust Fund
Newburgh Teachers' Association Benefit Trust Fund
52 Pierces Road Newburgh, New York 12550
Dental
Vision
Prescriptions
845.562.7988

MEMBER INFORMATION CHANGE FORM

Newburgh Teachers' Association Benefit Trust Fund members, please use this form to update your personal membership information if you have changed any of the information listed below. Due to HIPPA requirements, this must be done separately for the NTA and the Benefit Trust Fund. You may update your NTA records by completing this form and forwarding it to the NTA office. This information is for NTA use only.

Please Print Clearly

Please Check One:

☐ Teacher ☐ Teaching Assistant ☐ Substitute ☐ Retired Teacher

School: _____

Name: Last _____ First _____ M.I. _____

Please check if change of name. ☐ **Previous Name:** _____

ADDRESS: Street _____

City _____ State _____ ZIP _____

Home Phone _____ **Cell Phone** _____

HOME EMAIL ADDRESS _____@_____