

**CHANGE OF ADDRESS
MARINE CLUB OF NEW ORLEANS**

TODAY'S DATE: _____

MEMBER NAME _____

COMPANY NAME _____

COMPANY ADDRESS *(if changed)*

NEW ADDRESS *(your preferred mailing address)*

NEW CONTACT INFO

_____	HOME
_____	WORK
_____	MOBILE
_____	FAX
_____	E-MAIL
_____	OTHER

*** I prefer all MCNO correspondence by e-mail: Yes / No**
(Choose one)

MAIL this form to:

MCNO-C.O.A.
P.O. Box 8150
Metairie, LA 70011-8150