

Non-Profit Air and Ground Ambulance Services

Group Coordinator Add/Change Form

Please use this form to add or delete dependents (i.e. newborn/adopted children), indicate deceased members (with date of death), indicate terminated members, or change of address. If using payment other than check, please indicate payment type: Credit Card or Cash and include membership number. If one member is paying for multiple renewals, please list all membership numbers and names on form along with payment type and check number.

Member					Payment
Number	Name	Address, Additions or Changes	Renew	New	Туре
Example:	loo Modford				
<mark>5155555</mark>	Joe Medford	Add Child: Jill Medford DOB: 9/19/19	X		Check #1234