

Michigan Conference of Teamsters Welfare Fund



Contact Update Form

In order for MCTWF to communicate with you and provide you with information about your plan of benefits, it must be kept informed of your current address. Having a record of your current telephone number and email address would be of additional value in this regard. Please complete this form and return it to MCTWF at:

Michigan Conference of Teamsters Welfare Fund
Attention: Documents Department
2700 Trumbull Avenue
Detroit, Michigan 48216

Participant Information

Participant Information	
* Participant's Name (Last – First – Middle)	* Contract No.
* Address	Telephone Number
City State Zip	Email Address
* Participant Signature	* Date

* Required information.