



Williams Educational Fund Account Name Change Approval Form

This form is to be used when a donor requests a one-time Williams Educational Fund account name change. The account must be at the Legend, All-American, Champion or Hall of Fame membership level for the current fund drive.

Date: _____ Fund Drive: _____

Account Number: _____

Current Account Name: _____

WEF Membership Level: _____ Current Priority Points: _____

New Account Name Details

New Account Name: _____

Relation of New Account Holder: _____

* must be parent, brother, sister, son, daughter, granddaughter or grandson (18 years of age)

New Account Holder's Date of Birth: _____

New Account Holder's Mailing Address:

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ E-Mail Address: _____

The current Williams Fund account holder(s) understands and is in agreement, by signing this form, that he/she will not be able to re-claim any priority points from this account or return as the account holder(s). The new account holder(s) understands there will be NO account name change in the future.

Current Account Holder's Signature: _____ Date: _____

Current Account Holder's Signature: _____ Date: _____
(if applicable)

New Account Holder's Signature: _____ Date: _____

New Account Holder's Signature: _____ Date: _____
(if applicable)

OFFICE USE ONLY

Approved By: _____ Date: _____

- Copy on file & name change completed in Williams Educational Fund
Initials: _____ Date: _____
- Copy on file & name change completed in Ticket Office
Initials: _____ Date: _____
- Completion letters mailed to both parties
Initials: _____ Date: _____