



## SACA MEMBER / WAITLIST APPLICANT CHANGE OF ADDRESS FORM

This form must be completed by the SACA Member / Waitlist applicant.

CHANGE OF ADDRESS FORM	
Member / Waitlist Number	
Name	
Previous Postal Address	
Previous Residential Address (if different to postal)	
Current Postal Address	
Current Residential Address (if different to postal)	
Contact Number	
Email Address	

Please list full names and Member number if change of address includes other family members:

Full Name		Member Number	
Full Name		Member Number	
Full Name		Member Number	
Full Name		Member Number	
Full Name		Member Number	

Date

**Please email your completed form to [membership@saca.com.au](mailto:membership@saca.com.au), post to Member Services, PO Box 545, North Adelaide SA 5006 or Fax 8231 4346**

**SOUTH AUSTRALIAN CRICKET ASSOCIATION LTD.**

ABN: 44 623 135 393

Adelaide Oval, War Memorial Drive, North Adelaide | PO Box 545, North Adelaide SA 5006  
 P: (08) 8300 3232 E: [membership@saca.com.au](mailto:membership@saca.com.au) W: [saca.com.au](http://saca.com.au)