

CHANGE OF ADDRESS FORM

I am a current member of the Sufi Psychology Association and would like to change my previously listed address. Listed below is my NEW address, phone and email.

Date change is effective: _____ Today's Date _____

Name _____

Occupation _____

Mailing Address _____
Street

_____ City State Zip

Phones: H _____ W _____

Email _____

MEMBERSHIP LEVEL

- Benefactor \$100 Professional \$50 Regular \$35
 STUDENT \$15

Please mail this change to:

Sufi Psychology Association (SPA)
9965 Horn Road, Suite C
Sacramento, CA 95827