



### Change of Information Form

Please make sure to sign at the bottom. We cannot process the request without a signature.

**Account #** \_\_\_\_\_

**Subscriber/Patron Name:** \_\_\_\_\_

**Please change the following information:**

- Mailing address
- Contact number
- Additional Name (Must reside in same household: partners or married couples)
- Email Address
- Merge Accounts (Please provide account numbers below)
- Other

*(Please Print)*

**Old Information:**

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**New Information:**

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**Subscriber/Patron Signature:**

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**Signature** **Date**

**Please submit to the LA Phil via one of these 3 choices:**

**Email:** information@laphil.org

**Mail:** LA Phil – Audience Services  
 ATTN: \_\_\_\_\_  
 PO Box 1286  
 Los Angeles, CA 90078-1286

**In person:** at The Walt Disney Concert  
 Hall or Hollywood Bowl Box Office  
 (call 323 850 2000 for hours)