



# Member Contact Update Form (old)

Please only complete this form **if your personal contact information has recently changed.**

Please register with your personal e-mail address. Employer-provided e-mail addresses **will not be subscribed** as HSA does not conduct union communication over employer e-mail.

Our e-mail list is for HSA members only.

For general updates from HSA follow us on [Facebook](#) or [Instagram](#).

Surname \*

Given Name(s) \*

Street Address \*

City \*

Province/Territory \*  ▼

Postal Code \*

Personal Phone Number \*

Home Email Address (employer e-mail addresses will not be added to the email list) \*

Worksite \*

Job title \*

Date of Birth \*

Enter your Date of Birth (DDMMYY), e.g. 230476. *No, we don't care about your age and unfortunately we have no current plans to celebrate your birthday, but we need your date of birth to be sure we don't confuse you with one of the 20,000 HSA members who might share your name.* All records are confidential and secure. If you'd like to know more about [HSA's privacy policy, click here.](#)

- [Print](#)
- [PDF](#)

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