

Name Change Request Form

| Thank you for your business with Young Living. We are happy to assist |
|--|
| you with updating your Young Living Account. Please complete the |
| below form in its entirety to ensure an accurate and timely processing |
| of your request. |

| Member Number: | | |
|---|-------------------------------------|--|
| 4-Digit Security Pin Number: | | |
| Current Name on Account: | | |
| Desired Name for Account: | | |
| Desired Tax ID for Account: | | |
| | | |
| Signature: | Date: | |
| Please Note the following are required to process this request: | | |
| • Request must come from the email a question. | address currently on the account in | |

• Request form must be physically signed by the current account owner.

** Please include the completed attached documents in your email with this form. All information on submitted forms must match. **