

WYOMING BOARD OF PROFESSIONAL GEOLOGISTS  
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Website: http://wbpg.wy.gov

**ADDRESS CHANGE NOTIFICATION FORM**  
*(Please print clearly or type.)*

NAME: \_\_\_\_\_

License Number PG-\_\_\_\_\_ or GIT File Number # \_\_\_\_\_

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Please change my records to indicate a change in home and/or business address as shown below:

HOME ADDRESS

BUSINESS AFFILIATION

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(City, State, Zip Code)

Phone ( ) \_\_\_\_\_

Phone ( ) \_\_\_\_\_

E-Mail \_\_\_\_\_

E-Mail \_\_\_\_\_

**PLEASE CHECK ONE (1) BOX TO INDICATE PREFERRED MAILING ADDRESS:**

\_\_\_ HOME

\_\_\_ BUSINESS

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EFFECTIVE DATE OF CHANGE(S): \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE AUTHORIZING CHANGE

**NOTE:** Our statutes require business affiliation (if any) for publication in the roster. If there is no business address provided, the roster will default to home address. However, please provide both home and business addresses for the Board's use in contacting you.