



TEXAS BOARD OF CHIROPRACTIC EXAMINERS

CONTACT INFORMATION & WORK LOCATION **UPDATE FORM INSTRUCTIONS**

WHY DO I NEED TO UPDATE MY CONTACT INFORMATION?

Within 30 days you MUST:

Submit the contact information update form with any change in the electronic mailing address(email).

Within 30 days you MUST:

Submit the contact information update form with any change in home, mailing, or office address, and DC work locations.

INSTRUCTIONS

This form is for all licensees to timely submit any change of contact information including home address, mailing address, office address, DC work locations, phone number and email address.

Please complete the form, sign, date, and timely submit by email to licensing@tbce.texas.gov, by fax to (512) 305-6705 or by mail to 333 Guadalupe, Ste. 3-825, Austin, TX. 78701.

Should you have any questions regarding these instructions refer to 22 Texas Administrative Code §72.13 or contact the Board at:

licensing@tbce.texas.gov



Texas Board of Chiropractic Examiners

333 Guadalupe St, Suite 3-825, Austin, TX 78701



CONTACT INFORMATION & WORK LOCATION UPDATE FORM

Updating your information is as easy as 1, 2, 3!

1. Fill in your CURRENT information on this fillable PDF form
2. SAVE to your computer
3. Email as attachment to licensing@tbce.texas.gov

Check All that apply:

Mailing Address
 Home Address
 Office Address
 Email
 Phone

Chiropractor Name:		License Number:	
Previous Address:			
City:		State:	Zip code:
Current Address:			
City:		State:	Zip code:
Mailing Address (if different):			
City:		State:	Zip code:
Office Hours:			
Office location(s) where I currently work:			
1.		3.	
2.		4.	
E-mail Address:			
Daytime Telephone #:		Other Telephone #:	
Effective Date (m/d/yyyy):			

I hereby acknowledge that this is an official state document. I declare under penalty of perjury that the forgoing is true and correct. I understand that no one else may submit this form on my behalf and that I am accountable and responsible for the accuracy of any answer or statement on this form.

Further, I understand it is a violation of Texas Occupations Code §201.5025 and Texas Penal Code §37.10 to submit a false statement to the Board.

Signature: _____

Date (m/d/yyyy):

Should you have any questions regarding this form, contact the Board at licensing@tbce.texas.gov