IN THE MATTER OF:	*	IN TI	HE				
	*	CIRC	UIT CO	URT			
(child's current name)	*	FOR					
(street address)	*						
(city, state, zip)							
(phone number)	*						
FOR CHANGE OF NAME TO:	*						
	*						
(child's new name)	*						
BY AND THROUGH HIS/HER	*	Civil No.:					
MOTHER/FATHER/GUARDIAN:	*						
(petitioner's name) * * * * * * * *	*	*	*	*	*	*	*
TO THE HONORABLE, THE JUDGE C							
Petitioner,(child	l's current na	ame)			, a min	or, by a	nd through
his/her Mother / Father / Guar	dian (ch	eck one) respec	tfully re	epresent	s to this	s Court:
1. That the minor child was born	on		, in				
That the minor child was born and presently resides at		s birthdate)	(child	's birthplace	e - city, stat	e, country)
	(child's	present add	ress)				·
2. That the child's birthname is _	(c	hild's birth	name)			<u> </u>	
[] The child's name has been	n change	d to the	followi	na sina	a birth f	or the f	allowing
[] The child's name has been reasons (<i>List any reasons birth, for example, adoption</i>	why the			_			_
Name Change	ed To:				Reaso	on:	

]	I have attached a birth certificate or other document reflecting the child's current name			
3.	Petitioner wishes to change the child's name to:			
4.	(child's new name) This change of name is being requested because:			
5.	The name and address of each parent, guardian and custodian of the child is:			
6.	The other parent, guardian or custodian:			
	[] Consents to and joins this petition.			
	[] Has not consented at this time.			
	[] Cannot be found, and I have attached an Affidavit and Motion to Serve by Alternative Means.			
7.	Petitioner hereby certifies that the above change of name is not requested for any			
illegal or fr	raudulent purposes.			
WH child's nam	HEREFORE, I respectfully request that the Court pass an Order changing the minor ne from to (current name)			
	(current name) (new name)			

I,	,, solemnly affirm under the penalties					
(your current name - MOTHER/FA	ATHER/GUARDIAN) egoing paper are true to the best of my knowledge,					
	going paper are true to the best of my knowledge,					
information and belief.						
(Date)	(Your Signature MOTHER/FATHER/GUARDIAN)					
	(Your Name - Printed)					
	(Address)					
	(City, State, Zip)					
	(Telephone Number)					