



THE MISSISSIPPI BAR
MEMBERSHIP
P O BOX 2168
JACKSON, MS 39205
PHONE 601-355-4619

REQUEST FOR NAME CHANGE

To update our records with your new name, please complete the information below and include a copy of a document evidencing the legality of your name change. The document will be placed in your permanent file with The Mississippi Bar. We can accept either a faxed or scanned copy of a court document or an updated driver's license clearly showing the new name.

Return Completed Forms: email nmcintyre@msbar.org or fax (601)355-8635

Please be advised that the following attorney has changed their name.

Bar Number _____

Current name on Bar Membership Records _____

Please change the current name on Bar Membership Records to reflect the new name below (copy of legal document that changed name **must** be provided).

New Name: _____

Office Mailing Address: _____

City: _____ State: _____ Zip: _____

Office Telephone Number: _____

Home Telephone Number: _____

Email: _____

Check below if this also reflects a change of address.

The above also reflects a change of address.

Please make the above referenced change in my records. If you have any further questions regarding this matter please call me at _____.

(Sign name here)

(Date)