

Person Filing: _____
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Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____

FOR CLERK USE ONLY

Representing ☐ Self, without a Lawyer or ☐ Attorney for ☐ Petitioner OR ☐ Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of:

Case Number: _____

CONSENT OF PARENT TO NAME CHANGE OF A MINOR CHILD AND WAIVER OF NOTICE

a Minor

REQUIRED INFORMATION FROM PARENT, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME:

Name: _____

Address: _____

Telephone: _____

Date of Birth: _____
Month Date Year

Place of Birth: _____
City State Nation

I am the natural ☐ MOTHER or ☐ FATHER of the minor child named above.

I am the adoptive ☐ MOTHER or ☐ FATHER of the minor child named above.

2. I have read the Application for Name Change and consent to changing the child's LEGAL name to:

First	Middle	Last

3. I waive notice of all further proceedings in this matter.

UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Petitioner's Signature

Sworn to or Affirmed before me this _____ by _____
(Date)

Printed Name

My Commission Expires: (or
Seal below) _____

Deputy Clerk or ☐ Notary Public