

**KITSAP COUNTY DISTRICT COURT
STATE OF WASHINGTON**

IN THE MATTER OF THE NAME CHANGE OF – _____.	No. _____ NAME CHANGE PETITION (PARENT OR GUARDIAN PETITIONER)
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1. NAME CHANGE PETITION

- 1.1 Petitioner. I am the Petitioner. My relationship to the Person name above is –
____ I am the parent of the child whose name I desire to change.
____ I have been appointed as guardian of the individual whose name I desire to change.

- 1.2 Current Legal Name. The full legal name of the Person whose name I desire to change is –

CURRENT FIRST NAME	CURRENT MIDDLE NAME	CURRENT LAST NAME
_____	_____	_____

- 1.3 New Name. I request the Person’s legal name be changed by the Court to the following name –

NEW FIRST NAME	NEW MIDDLE NAME	NEW LAST NAME
_____	_____	_____

- 1.4 Reasons For Name Change. I want the Court to change the Person’s name for the following reasons –

_____.

- 1.5 Court Date (select a date at least two court days after the date you file this petition). I would like the name change court date to be held in courtroom 203 at 9:00 AM on –

_____.

- 1.6 Not Fraudulent. This petition is not made for any fraudulent purpose.

- 1.7 Rights Of Others. The Person’s new name will not infringe upon the rights of others.

1.8 Prior Name Change(s).

___ No Prior Name Change. The Person’s name has not been changed prior to this petition.

___ Prior Name Change. The Person’s name has been changed prior to this petition or a judge has denied the Person’s name being changed prior to this petition.

Note – Please explain for each prior name change the date, court, case number, previous name, reason for seeking name change, and the court’s decision.

2. ADVANCE NOTICE OF HEARING REQUIRED

Note – If applicable to the Person whose name will be changed, you are required by law to – (1) check the box in section 2.1 and/or section 2.2; **and** (2) provide advance notice of the hearing.
Failure to do so is a crime.

2.1 ___ DOC. The Person is currently under the jurisdiction of the Department of Corrections.

Note – If the Person is under the jurisdiction of the Department of Corrections, I understand it is a crime for me to fail to provide advance notice of the name change petition to the Department of Corrections not fewer than 5 days before the name change hearing.

2.2 ___ Sex Offender. The Person is currently required to register as a sex offender.

Note – If the Person is currently required to register as a sex offender, I understand it is a crime for me to fail to provide advance notice of the name change petition to the Washington State Patrol and to the Kitsap County Sheriff not fewer than 5 days before the name change hearing.

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct, and that I am the person whose name I typed (or wrote) below.

SIGNED at (city) _____, (state) _____ on (date) _____.

/s/ Signed Electronically

[Note – By typing your name, you intend to sign electronically and agree your electronic signature is the same as a handwritten signature for the purpose of validity, enforceability, and admissibility.]