

Benton County District Court
State of Washington

In the Matter of the Change of Name of:
(Parent/Guardian Names)

[Last, First Middle]

[Last, First Middle]

on behalf of Minor

[Child's Last Name, First Middle]

Case No. NCY -

Petition for Name Change
Of Minor Child

(Clerk's Action Required)

Comes now:

Parent/Guardian **Last Name** **First** **Middle**

Parent/Guardian **Last Name** **First** **Middle**

And petitions the Court for an order changing the name:

From: (Current Full Legal Name)

Last **First** **Middle**

to the name

To: (New/Desired Legal Name)

Last **First** **Middle**

and states:

1. The child is _____ years of age and was born on _____ (Date of Birth),
at _____ (City, State, Country of Birth).
2. The child is a resident of Washington State. Yes No
3. The child is required to register as a sex offender. Yes No
[Failure to provide required notice to the Benton County Sheriff
and Washington State Patrol is a crime. RCW 9A44.130; RCW 4.23.130]
4. The child is an offender under the jurisdiction of the Department of Corrections. Yes No
[Failure to provide required notice to DOC is a crime, RCW 4.24.130]

5. If not the parent(s), the petitioner(s) are the child's legal guardian with the legal authority to submit this petition. Yes No

6. If both parents or guardians have not signed this petition, the child's other parent or guardian:
Has not been located and has had no contact with the petitioner. Yes No
Date of last contact with other parent: _____

7. Has the child ever had a name change prior to this petition? Yes No
Please explain. (Date, place, reason)

8. This petition is not made for any illegal or fraudulent purpose.
9. This petition will not be detrimental to the interests of anyone else.
10. Any child named in this petition who is age 14 or older joins in the petition and has signed the petition.
11. Petitioner(s) request a change of name for the following reason(s). Please explain.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT.

Signed at _____, Washington, on _____.

Parent/Guardian Signature Parent/Guardian Signature

Parent/Guardian Printed Name Parent/Guardian Printed Name

Minor's Signature (if 14 years or older) Minor's Printed Name

Petitioner's Street Address/PO Box

City, State, Zip

Confidential Information (CIF)

Clerk: Do not file in a public access file

Benton County District Court - State of Washington

Important! Only court staff and some state agencies may see this form. The other party and his/her lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

1. Who is completing this form? (Name): _____

2. Your Information:

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Driver's license/identification card #:	Race:	Relationship to children in this case:	
Mailing address:			

Home address (check one): <input type="checkbox"/> same as mailing address <input type="checkbox"/> listed below (street, city, state, zip):		
Cell Phone:	Home Phone:	Email:
Employer's name:		Employer's phone:
Employer's address:		

3. Other Party's Information – This person is a (check one): Petitioner

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Driver's license/identcard (#, state):	Race:	Relationship to children in this case:	
Mailing address:			
Employer's address:			

4. Children's Information -

Child's full name (first, middle, last)	Date of birth (MM/DD/YYYY)	Race	Sex	Current location: lives with
1.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> other: _____
2.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> other: _____
3.			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> other: _____