

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
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: _____

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

(You may submit a Notarized Waiver or serve notice and provide proof to the court, but you must do one or the other)

_____ a Minor

REQUIRED INFORMATION FROM PARENT NOT FILING FOR NAME CHANGE, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME:

Name: _____

Address: _____

Telephone: _____

Date of Birth: _____
Month Date Year

Place of Birth: _____
City State Nation

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

(Non-Petitioning) Parent's Signature

Printed Name

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public