| | | | _ | |
|------------------|------------------------------------|--|-----------------------------------|--|
| | | | _ | |
| City | , State, ZIP: | / | _ | |
| | son Filing is: [] SELF (No Attorn | | _ | |
| | | | | |
| Atty | . Phone: | | FOR CLERK'S USE ONLY | |
| | SU | PERIOR COURT OF AR YAVAPAI COUNTY | IZONA | |
| In the Matter of | | Case Number: _ | 1300CV | |
| | | CONSENT OF P NAME CHANGE CHILD AND WA | _ | |
| a M | linor | | | |
| RE | QUIRED INFORMATION FRO | OM PARENT, UNDER OATH O | R AFFIRMATION: | |
| 1. | INFORMATION ABOUT ME | Ē : | | |
| | Name: | | | |
| | Address: | | | |
| | Telephone: | | | |
| | Date of Birth: | | | |
| | | | | |
| | Place of Birth: | 2: / | N. e | |
| | | State ER or [] FATHER of the minor of HER or [] FATHER of the mino | | |
| 2. | I have read the Application to: | for Name Change and consent t | o changing the child's LEGAL name | |
| | First | Middle | Last | |
| 3. | I waive notice of all further p | waive notice of all further proceedings in this matter. | | |
| | | OATH OR AFFIRMATION | N | |
| The | e contents of this document | are true and correct to the be | st of my knowledge and belief. | |
| Signature | | Date | | |
| Swo | orn to or affirmed before me th | nis date: | | |
| Му | Commission expires | Notary Public or Deputy Clerk | | |