

COWLITZ COUNTY DISTRICT COURT

In the Matter of the Change of Name of)	
)	No. _____
)	
_____)	
Minor)	Consent to Change of Name
)	
By _____)	
Petitioner)	

1. My name is _____.
2. I am the father/mother [circle one] of _____.
3. I hereby consent to changing the above child's name to:

_____. I voluntarily give up my right to: object to the change of name; receive notice of any court hearings; and attend any court hearings.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signature Date

City and state where this document was signed

State of _____
County of _____

I certify that I know or have satisfactory evidence that _____ [person's name] is the person who appeared before me, and this person acknowledged that he/she signed this document and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the document.

Signature Date

Title

My appointment expires _____.