

# STATE OF MAINE

\_\_\_\_\_ County Probate Court

Docket No. \_\_\_\_\_

In Re: \_\_\_\_\_

**Petition for Change of Name  
(Adult) 18-A M.R.S. §1-701**

Attorney for Petitioner, if any

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_

Maine Bar Registration Number \_\_\_\_\_

1. Full legal name of petitioner (include middle name, if any):
2. Address and telephone number of petitioner (include physical address, if different):
3. Date of birth of petitioner:
4. Petitioner desires to change his/her name to (include middle name, if any):
5. Petitioner desires to change his/her name for the following reasons:

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature, Using Current Legal Name

\_\_\_\_\_  
If petitioner(s) is/are represented by an attorney, said attorney  
Must also sign petition pursuant to Rule 11