

CONS

Your Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Self-Represented Petitioner

**DISTRICT COURT
CLARK COUNTY, NEVADA**

In the Matter of the Application of:

(Parent's name)

For Change of Name of the Minor Children:

(First child's current name)

and *(Second child's current name or "N/A")*

CASE NO.: _____

DEPT: _____

CONSENT TO NAME CHANGE (PARENT)

I, *(consenting parent's name)* _____, the
(*check one*) mother / father of the above-named minor child(ren), give my full and free
consent to change *(first child's current name)* _____'s
name to *(first child's new name)* _____ and to change
(second child's current name or "N/A") _____'s name
to *(second child's new name)* _____.

I request that the Petition for Change of Name be granted.

DATED this *(day)* _____ day of *(month)* _____, 20____.

Submitted By: *(parent's signature)* ▶ _____

(print your name) _____

SUBSCRIBED and SWORN to before
me this _____ day of
(month) _____, *(year)* _____.

NOTARY PUBLIC