

**KING COUNTY DISTRICT COURT  
STATE OF WASHINGTON**

**In re the Petition of:**

\_\_\_\_\_ ) **No.** \_\_\_\_\_  
 )  
**for the Change of Name of:** )  
 ) **PETITION FOR CHANGE OF NAME**  
 ) **OF A MINOR**  
 \_\_\_\_\_ )  
**A Minor. [First, Middle Last Name] )**

Comes now \_\_\_\_\_ (legibly print full name) and  
 First, Middle, Last  
 \_\_\_\_\_ (legibly print full name) petitioning  
 First, Middle, Last  
 the court for an order changing the name of \_\_\_\_\_  
 First, Middle, Last  
 (legibly print current name) his, her, their (**circle one**) son, daughter, ward (**circle one**), to the  
 name \_\_\_\_\_, and states that:  
 First, Middle, Last

1. The child is \_\_ years of age and was born on \_\_\_\_\_, at \_\_\_\_\_.  
 (date of birth) (place of birth)
2. Is the child a resident of King County, Washington? Yes  No
3. Is the child required to register as a sex offender? Yes  No   
**[Failure to provide required notice to the King County Sheriff and Washington State Patrol is a crime. RCW 9A.44.130(8).]**
4. Is the child an offender under the jurisdiction of the Department of Corrections?  
 Yes  No   
**[Failure to provide required notice to the DOC is a crime. RCW 4.24.130.]**
5. Is/are the petitioner(s) the parent(s) of the child? Yes  No
6. If not the parent(s), is/are the petitioner(s) the child's legal guardian and have the legal authority to submit this petition. Yes  No
7. The child's other parent:
  - A. Has given consent to this name change and signed the petition. Yes  No
  - B. Has not given consent to this name change. Yes  No
  - C. Has not been located and has had no contact with petitioner. Yes  No   
 Date of last contact with other parent: \_\_\_\_\_

8. Has the child ever had a name change prior to this petition? Yes  No   
Please explain. (Date, place, reason) \_\_\_\_\_

9. I/we declare this petition is not made for any illegal or fraudulent purpose.  
10. I/we declare this petition will not be detrimental to the interests of anyone else.  
11. Any child named in this petition who is age 14 or older joins in the petition and has signed the petition.  
12. Petitioner(s) request a change of name for the following reason(s). Please explain.

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

**I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING STATEMENTS IN THIS PETITION FOR A NAME CHANGE OF A MINOR ARE TRUE AND CORRECT.**

Signed at \_\_\_\_\_, Washington, on \_\_\_\_\_, 20\_\_\_\_.  
City Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Minor's Signature (if over 14 years of age)

\_\_\_\_\_  
Minor's Printed Name

Received: \_\_\_\_\_  
Court Clerk