

_____ **Court of the State of New York**
County of _____

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In the Matter of the Application of

As Parent and Natural Guardian for leave
to Change Minor's Name To

**CONSENT
TO MINOR'S
CHANGE OF NAME**

Index # _____

-----X

STATE OF NEW YORK, COUNTY OF _____ ss.:

_____, being duly sworn, says:

I am _____ over the age of eighteen _____ fourteen years of age or over and reside at

I am _____ the parent of the Minor child _____ the Minor child herein.

I have read the within Petition dated _____, requesting a change
of name from _____ to

_____.

I consent to such change.

Signature of Affiant in the presence of the Notary

Sworn to before me this

_____ day of _____, 20____.

Notary Public