

**CLALLAM COUNTY DISTRICT COURT II
STATE OF WASHINGTON**

Mailing Address: 502 E Division
Forks, WA 98331
360-374-6383

In the Matter of the Change of Name of:

NO.

Petitioner

**PETITION FOR CHANGE OF NAME
(ADULT)**

COMES NOW _____ and petitions the above-entitled court for an order changing his/her name to _____ and shows the court as follows:

1. Petitioner was born on the ____ day of _____, in _____ County, State of _____; is a resident of Clallam County, Washington; and is a citizen/legal resident of the United State of America.
2. Petitioner has been known as _____ for a period of _____ and requests this court to change his/her name to _____ for the reason that:
 3. A. This petition is not made to avoid creditors or for an illegal or fraudulent purpose, but for the bona fide purpose of changing the petitioner's name to the name by which he/she has been and prefers his/her name to be referred.
 - B. I am not under the jurisdiction of the department of corrections.
 - C. I am not required under RCW 9A.44.130 to register as a sex offender.

WHEREFORE, petitioner requests that his/her name be changed by order of this court from _____ to _____.

Petitioner

STATE OF WASHINGTON)
) ss.
COUNTY OF CLALLAM)

_____, being first and duly sworn, upon oath, deposes and says that : I am the petitioner above-named and I have read the foregoing Petition for change of Name, know the contents thereof and believe the same to be true.

Petitioner

Subscribe and sworn to before me this ____ day of _____.

Notary Public in and for the State of _____
Residing in _____(city)
My appointment expires:_____