

STATE OF INDIANA)
)
COUNTY OF ELKHART)

IN THE ELKHART SUPERIOR COURT

CASE NO: _____

IN RE THE NAME CHANGE OF MINOR:

Name of Minor

Name of Person Filing

Select One: Mother Father Other _____

CONSENT TO CHANGE OF NAME OF MINOR

I, _____ make the following declarations:

1. My full name is _____.
2. I reside at: _____.
3. I am the parent / guardian of the minor child.
4. Pursuant to Indiana Code 34-28-2-2, I hereby consent for the Minor Child's name to be changed from _____ to _____.
5. This consent is executed by me without coercion or duress and is irrevocable.
6. The person who filed this case has served me with a copy of the Petition for Change of Name of Minor as required by the Indiana Trial Rules.

I affirm under penalties for perjury that the foregoing representations and statements are true

Signature

Date

Printed Name

Email Address