

**IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
CIVIL DIVISION**

IN RE: CHANGE OF NAME OF

:
: File No.
:
: NAME CHANGE
:

PETITION FOR NAME CHANGE OF MINOR CHILD

The Petitioner(s), _____ requests that this Court order a change of name for _____, (only list minor child's initials), a minor child and in support thereof represents as follows:

1. The Parent/Natural Guardian is _____, and who presently resides at _____, in the County of Lehigh.
2. The Parent/Natural Guardian is _____, and who presently resides at _____, in the County of Lehigh.
3. The Minor Child is _____ (only list initials), with a year of birth of _____ and residing at _____.
4. During the past five (5) years, the Minor Child has resided at the following addresses:
(any additional address, please provide on a separate sheet)

Addresses

Dates

a) _____ to _____
(street) (city) (county) (state)

b) _____ to _____
(street) (city) (county) (state)

c) _____ to _____
(street) (city) (county) (state)

5. There are no judgments or decrees pending against the Minor Child.

6. Petitioner(s) desires to change the Minor Child's name for the following reason(s):

7. Minor Child was born in _____.
(city and state)

WHEREFORE, Petitioner(s) respectfully requests that this Court enter an Order changing the name of Minor Child from _____ to _____ (insert initials only).

Respectfully submitted,

Print Name

Petitioner Signature

Telephone Number _____

E-Mail Address _____

I verify that the statements made in this pleading are true and correct. I understand that false statements herein are made subject the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.

Date

Petitioner

CERTIFICATE OF COMPLIANCE

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: _____

Signature: _____

Name: _____

Attorney No. (if applicable): _____