CW. No.	

APPLICATION FOR RECORDING OF CHANGE OF NAME OR SURNAME OF A CHILD UNDER 18 YEARS OF AGE

Please read the guidance notes before completing this form. The following information concerning the child must be supplied. If you have the child's current birth certificate please enclose.

Please	e read our privacy statement to see how we use and	protect you	ır personal inf	ormation	at www.finar	nce-ni.go	.uk/public	ations/nisr	ra-privacy-no	otices
1	Full name(s) of child as registered									
2	Surname of child as registered									
3	Date of Birth (dd/mm/yyyy)									
4	Place of Birth (Town/City)									
5	Sex	Male			Female					
6	Mother's/Parent's name(s), surname and maiden name (if applicable)									
7	Fathers / Second Female Parent's/ Parent's name(s) and surname									
8	Full name(s) of child as changed									
9	Surname of child as changed									
10	Date of any previous application for a change of name(s) or surname									

Statutory Declaration (Please see Note 2 & Note 3 overleaf)

I/We make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835.

11 I/We have given up the name(s)/surname opposite (and at 1 & 2 over) for our/my child						
and have adopted for all purposes the	Name(s)	Surname				
name(s) and surname opposite (and at 8 & 9 over) for our/my child						
12 I/We sincerely declare that the above particular name and surname as stated at 8 & 9 over	ars are correct and that my/ou	r child is known by the				
Part A: to be completed by: Mother, Adoptive Mother Adoptive Parent, Surviving Parent, Guardian.	Part B: to be completed by: Father, Second Female Parent, Adoptive Parent, Other person with parental responsibility.					
See note 2 f	or further guidance					
Name	Name	Name				
Relationship to child	Relationship to child	Relationship to child				
Signature	Signature	Signature				
Date	Date					
Full Postal Address	Full Postal Address					
Postcode	Postcode					
Tel. No	Tel. No					
Email Address	Email Address					
Declared before me	Declared before me					
this20	this day of	20				
Signature of officer in whose presence declaration was made	Signature of officer in whose presence declaration was made					
Name of officer whose presence declaration was made (please print)	Name of officer whose presence declaration was made (please print)					
Qualification	Qualification					
Address or Office/Company Stamp	Address or Office/Company Stamp					
Number and type of Certificate(s) required: Address to send certificates: (please tick) Perso	Fulln named at 12 (A)	Short Or 12 (B)				

Contact Details: GENERAL REGISTER OFFICE

COLBY HOUSE,

STRANMILLIS COURT, BELFAST, BT9 5RR

Telephone: 0300 200 7890 (within the UK) or +44 300 200 7890 (outside

UK) Website: www.nidirect.gov.uk/gro Email: gro_nisra@finance-ni.gov.uk

Note 1: What changes can be made?

An application may be made to record one change of name and one change of surname for a child under the age of 18. The child must have been born or legally adopted in Northern Ireland.

Note 2: Only qualified applicants can sign this application. These are -

- a. both parents where they are/were married to, or in a civil partnership with each other; or
- b. **both parents** where they are not married to, or in a civil partnership with each other and the father/second female parent has parental responsibility for the child; or
- c.the mother where the parents are not married to, or in a civil partnership with each other and the father/second female parent does not have parental responsibility; or
- d. the adoptive parent(s) of the child; or
- e. **the surviving parent** if either of the parents of the child is deceased **and** the surviving parent has parental responsibility for the child; or
- f. **the guardian** of the child or any other person who has parental responsibility for him/her if both parents are deceased or either of the parents is deceased and the surviving parent does not have parental responsibility for the child.

Note 3: Who can witness this declaration?

This declaration must be signed by the qualified applicant in the presence of a Justice of the Peace (JP), a Lay Magistrate, a practicing solicitor, notary public or someone else commissioned to administer oaths. If there are two qualified applicants, both signatures must be witnessed.

Justices of the Peace and Lay Magistrates do not charge for this service. To contact a JP please telephone 028 9041 2277 to speak to a member of Judicial & Customer Services Group; or you can write to the Northern Ireland Courts and Tribunals Service (NICTS), Laganside House, 23 - 27 Oxford Street, Belfast BT1 3LA.

Note 4: What happens next?

The completed form and payment should be returned to this office at the address above. Your application should be processed within 15 working days of receipt. The changed name and/or surname will be shown on the child's birth certificate. When calculating the fees please include the fee for the name change together with the fee for any certificates.

Cl	he	cl	(li	st

Birth Certificate	Signed Declaration	Declaration Witnessed	
Correct Payment calculated	Payment/Complete	d Payment Mandate form	

Payment Mandate Form for Postal Applications

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Fees and payment methods

Details of fees payable are available in on our website at www.nidirect.gov.uk/gro; or by contacting us using the telephone number above.

Payment can be made by post with a cheque or postal order, made payable to "Registrar General". Cash should not be sent in the post.

Should you wish to pay by credit/debit card please fill in the instruction below and include it with your application.

ALL PAYMENTS BY POST SHOULD BE FORWARDED TO THE GENERAL REGISTER OFFICE AT THE ABOVE ADDRESS

We can also accept payment by credit/debit card or cash at our office.

Please note: if you are completing your credit/debit card details, we recommend that you use a secure form of posting. This payment mandate form will be destroyed once payment has been confirmed.

For security reasons we cannot accept payment details by e-mail and payments cannot be made online for these applications.

Payment should be made in pounds sterling.

Credit/debit card instruction

Applicants Name	
Type of card	
Mastercard	Visa Switch/Maestro or Solo Visa Electron
Card Number	
Security number (the strip)	e last three numbers shown on your cards signature
Expiry date	Issue No. (Switch/Maestro or Solo) Valid from date.
Total Fee £	Cardholders signature:
Cardholders name: (BLOCK CAPITALS)	
Cardholders	
Full Address	
Telephone No.	Email:

GRO 230 (08 20)