

INSTRUCTIONS
Petition for Name Change of an Adult

The Petition for Change of Name for an Adult is a document filed by a person who desires to change either his Christian or surname and to adopt another name. You must be 16 years of age or older to file a Petition to change your own name. The Petitioner must set forth reasons for the change of name and the name he wishes to adopt. The Court may enter judgment that the adopted name of the party be substituted for the original name. If upon the filing of the application for change of name, the Court deems it proper that notice be given, it may order that notice of the application be given by publication or by service upon any party interested. The change of name shall not operate to release the person from any obligations which he has incurred or is under by the original name, or defeat or destroy any rights of property or action which he had in his original name. GRIC Code §§ 8.301-302.

Please read the following instructions carefully.

1. Fill out the Petition for Change of Name for an Adult.
2. Sign before a notary public or Clerk of the Court and return the Petition to the Court to be filed. Provide the Court with a copy of your birth certificate.
3. There is a \$25.00 filing fee. Please pay the fee at the Court's cashier window. Payment can be made by cash, cashier's check, money order, or Visa/Mastercard. Personal checks are not accepted.
4. The Community Court will set a date and time for the Petition to be heard. If there is an immediate need for a hearing, please inform the Clerk, so a date and time can be set as soon as possible.
5. If you have any further questions, please ask the Clerk. If the Clerk cannot answer your questions, they will direct you to a lawyer in the local area. You may also email your questions to Court.Questions@gric.nsn.us.
6. Address & phone numbers to the Gila River Indian Community Courts:

Sacaton Court
721 W. Seed Farm Rd.
PO Box 368
Sacaton, Arizona 85247
Phone: (520) 562-9860
Fax: (520) 562-9867

Westend Judicial Center
Rt. 2, Box 808
Laveen, Arizona 85339
Phone: (520) 562-9862
Fax: (520) 562-9869

Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____

I am representing myself

Attorney/Advocate Name: _____

**IN THE COURT OF THE GILA RIVER INDIAN COMMUNITY
STATE OF ARIZONA**

IN THE MATTER OF:

CASE NO.: _____

**PETITION FOR CHANGE OF NAME
FOR AN ADULT**

Current Name of Petitioner

I, the Petitioner, submit this application for a change of name pursuant to Gila River Indian Community Code, Title 8, Chapter 3, Section 301. I declare the Courts of the Gila River Indian Community have proper jurisdiction over this matter and that the following statements are true and correct to the best of my knowledge.

1. INFORMATION ABOUT ME, THE PETITIONER:

Birth Name: _____ Date of Birth (MM/DD/YYYY): _____

Place of Birth (City, State): _____ County of Birth: _____

2. ARE YOU AN ENROLLED MEMBER OF THE GILA RIVER INDIAN COMMUNITY? _____

I am a Community Member. Tribal Enrollment #. _____

I am NOT a Community Member.

3. CURRENT LEGAL NAME:

First	Middle	Last

Current Mailing Address: _____
Street Address, City, State, Zip Code

Current Physical Address: _____
Street Address, City, State, Zip Code

4. OTHER NAMES USED:

A. Former Name: _____
First Middle Last

Dates Name Used: From _____ to _____
(MM/DD/YYYY) (MM/DD/YYYY)

B. Former Name:

Dates Name Used: From _____ to _____
(MM/DD/YYYY) (MM/DD/YYYY)

5. REQUESTED NAME CHANGE:

I request that my name be legally changed to:

First	Middle	Last

I request the name change for the following reason(s):

6. CRIMINAL HISTORY:

Have you ever been convicted of a felony? Yes No

If yes, please list all felony convictions:

DATE OF COMPLAINT/INDICTMENT	FELONY CASE NUMBER	NAME OF COURT	U.S FEDERAL DISTRICT, STATE OR TRIBE

Are there any other criminal complaints or charges pending against you at this time in this Court or any other court(s)?

COMPLAINT OR INDICTMENT	CASE NUMBER	NAME OF COURT	U.S FEDERAL DISTRICT, STATE OR TRIBE

7. STATEMENT TO THE COURT:

Please initial each box.

I understand and acknowledge this change of name, if granted by the Court, shall not operate to release myself from any obligations which I have incurred or are under my original or previous name, or to defeat or destroy any rights of property or destroy any rights of property or action which I have in my original or previous name.

I am not knowingly requesting a change of any name for purposes of committing or furthering any offense of theft, forgery, fraud, perjury, or any other crime.

8. OATH OR AFFIRMATION OF THE PETITIONER:

Under penalty of law, I swear or affirm the above statements are true to the best of my knowledge.

Signature of Petitioner

Date

VERIFICATION:

SUBSCRIBED AND SWORN to me this _____ Day of _____, 20_____.

Clerk of the Court/Notary Public

My Commission Expires:_____