

<input type="checkbox"/> County Court <input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____		
IN THE MATTER OF THE PETITION OF: Parent/Petitioner: _____ for: _____ Minor Child: _____ to change the child's name to: _____		▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): _____ Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg.#: _____		Case Number: _____ Division Courtroom
CONSENT OF NON-CUSTODIAL PARENT		

1. I, _____, am the non-custodial parent of the minor child.
2. I understand that a Petition for the change of my child's name will be presented to this Court.
3. I understand that I have a right to participate in the hearing and to voice objection to the change of name.
4. I give up any objection and consent to the change of name.
5. I give up my right to be present at any hearing on this change of name.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

SIGNATURE

 (Printed name of Non-custodial Parent)

 Signature of Non-custodial Parent

 Address

 City, State, Zip Code

 Telephone #: (home) (work) (cell)