



ACT GOVERNMENT

Births, Deaths and Marriages Registration Act 1997 Registrar-General's Office

APPLICATION TO REGISTER A CHANGE OF NAME FOR AN ADULT

PRIVACY COLLECTION STATEMENT (PRIVACY ACT 1988 (C'WLTH))

PRIVACY NOTES

The *Births, Deaths and Marriages Registration Act 1997* authorises the Registrar-General to collect the information required by this form in processing your application. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988 (C'wlth).* However, the Registrar-General provides identifiable information to law enforcement organisations and authorised organisations that have the legal authority to request information under prescribed circumstances.

GENERAL INFORMATION

This form can only be used to register a change of name for an adult whose birth is registered in the ACT, or who is currently a resident of the ACT and has been for more than 3 months. If you were born overseas you must be an Australian citizen or permanent Australian resident. It is not necessary to register a change of name where you are assuming your partners name through a marriage that occurred within Australia.

The Registrar-General will not register a change of name unless satisfied of the identity and age of the person whose name is to be changed and that the change is not sought for a fraudulent or other improper purpose. The Registrar-General will not accept an application to register a change of name if you have registered a change of name within the last 12 months. The Registrar-General will not register a change of name, if as a result, the name would become a prohibited name.

REFERRAL TO THE AUSTRALIAN FEDERAL POLICE (AFP) AND OTHER AGENCIES AND CONSENT TO RELEASE INFORMATION

This form and any evidence produced in support of this application may be directed to the AFP to assist the Registrar-General in assessing your application. This form may also be directed to agencies including (but not limited to) other Birth, Death and Marriage Registries, the Passports Office, Department of Immigration and Citizenship, and Motor Vehicle Registries to assist the Registrar-General in assessing your application. Usually these referrals are simply to verify the evidence that you have provided in making your application. If there are discrepancies, we may require you to correct any errors with the issuing agency prior to being able to register the change of name application. It is extremely important that all identity documents are accurate and reflect the correct identity information.

In all cases it is necessary for you to consent for the Registrar-General to require the AFP or other agency to release information available to them that may assist the Registrar-General in making his/her decision. As a result, as you complete this form it is assumed that you are consenting to the release of information by these agencies in support of your application.

REASONS WHY YOUR APPLICATION MAY BE REJECTED

The Registrar-General may refuse to register your change of name application if you:

- have previously offended;
- have a significant association with an offender;
- are currently involved in an investigation;
- have outstanding debts;
- have failed to advise of previous changes of name in the ACT or any other jurisdiction;
- have failed to prove ACT residency for 3 or more months; or,
- are unable to produce the required proof of identity documentation.

If however you are able to demonstrate that the information obtained by the Registrar-General has been superseded, then the change of name application can be reviewed.

REGISTRATION AND NOTIFICATION OF A CHANGE OF NAME

If your application to register a change of name is approved, an entry will be created in the change of name register. If you were born in the ACT, the new name will also be noted on your birth registration and will appear on all birth certificates issued after registration of the change of name. If you were born in another State or Territory within Australia, the Registrar-General of that jurisdiction will be notified of the change of name, and may appear on birth certificates subsequently issued by that jurisdiction.

FEES CURRENT TO 30 JUNE 2009

The fee to lodge an application to register a change of name is \$89.00. This fee is non-refundable regardless of whether your application is registered. Upon registration a further \$36.00 fee is payable to obtain the certificate of change of name or an updated birth certificate. If the certificate is to be sent by post a \$5.00 registered person to person postage fee applies, or \$16.00 if it is sent by international registered post. Payment may be made by cash, credit card, EFTPOS, money order or cheque, all cheques and money orders should be made payable to the Registrar-General. Applications paid by personal cheque will be held for 7-10 working days for the cheque to clear.

CONTACT DETAILS

The Registrar-General's Office is located at 255 Canberra Avenue, Fyshwick ACT 2609. Our postal address is GPO Box 158, Canberra ACT 2601. Our office hours are 9:00am to 4:30pm Monday to Friday. You may also download forms and information from our website at www.ors.act.gov.au or contact this office on (02) 6207 0460.

PROOF OF IDENTITY, RESIDENCY AND OTHER DOCUMENTATION REQUIRED

Upon application you will need to provide sufficient evidence to allow the Registrar-General to be satisfied of your identity.

- (a) You must provide your original birth certificate.
- (b) If born overseas, we will require a current Australian Passport, Australian Citizenship Certificate or entry visa. The entry visa must demonstrate that the applicant is a permanent Australian resident, applications will not be registered for temporary visa holders. If you are unable to provide any of these documents however you are a permanent resident of Australia, you should provide a Certificate of Evidence of Resident Status, available from the Department of Immigration and Citizenship.
- (c) If born in another State or Territory, we require 3 forms of evidence proving residency in the ACT for at least the previous 3 months. All evidence of residency must not be older than 6 months.
- (d) If you have previously changed your name through marriage, by registered deed poll or by registered change of name, we require evidence of those changes of name.
- (e) You must also provide at least two other current forms of identification from the following list. At least one of these must show your current address and signature:
 - Australian Driver's Licence
 - Medicare Card
 - Centrelink Card
 - Credit Card
 - Student Identity Card
 - Proof of Age Card
 - Security Guard Licence

WITNESSES TO SIGNATURES AND CERTIFIED COPIES OF DOCUMENTS

If you are lodging this application in person you must supply original documentation. If sending your application by post you must have the documents certified as true copies of the original documents by a Justice of the Peace, Solicitor or Police Officer.

If you are lodging this application in person all signatures may be witnessed by Births, Deaths and Marriages staff within the Registrar-General's Office. If you are sending your application by post all signatures must be witnessed by a Justice of the Peace, Solicitor or Police Officer.

Telephone Interpreter Services

If English is not your first language, and you need help with this form, please telephone 131 450 for assistance 24 hours a day.

ENGLISH If you need interpreting help, telephone: ARABIC إذا احتجت الساعدة في الترجمة الشفوية ، إتصل برقم الهاتف: CHINESE 如果你需要传译员的帮助, 请打电话: CROATIAN Ako trebate pomoć tumača telefonirajte: GREEK Αν χρειάζεστε διερμηνέα τηλεφωνήσετε στο ITALIAN Se avete bisogno di un interprete, telefonate al numero: Jekk ghandek bżonn I-ghajnuna t'interpretu, cempel: MALTESE PERSIAN اگر به ترجمه شفاهی احتیاج دارید به این شماره تلفن کنید: PORTUGUESE Se você precisar da ajuda de um intérprete, telefone: SERBIAN Ако вам је потребна помоћ преводиоца телефонирајте: SPANISH Si necesita la asistencia de un intérprete, llame al: TURKISH Tercümana ihtiyacınız varsa lütfen telefon ediniz: VIETNAMESE Nếu bạn cần một người thông-ngôn hãy gọi điện-thoại: TRANSLATING AND INTERPRETING SERVICE 131 450 Canberra and District - 24 hours a day, seven days a week





Registration No		

Births, Deaths and Marriages Registration Act 1997 Registrar-General's Office

APPLICATION TO REGISTER A CHANGE OF NAME FOR AN ADULT PART A – DETAILS OF APPLICANT

FAILTA - DETAILS	ALLECANT			
I am changing my name from (please	complete the details of your current name)			
Surname		Given names		
I am changing my name to (please co	mplete the details of the name you would like to	be known as after the chan	ige of name is registered)	
Surname		Given names		
PERSONAL DETAILS OF APPLIC	ANT			
Surname at birth		Given names at birt	th	
Date of birth Place of	f birth (town/city, state and country)			Sex
Current residential address		Postal address if dit	fferent from residential	-
Talanhana numbar during husinasa	Postcode	E mail addrage		Postcode
Telephone number during business	TIOUIS	E-mail address		
MOTHER'S DETAILS				
Surname		Given names		
Maiden/Previous name		Date of birth	Place of birth	
		1 1		
FATHER/PARENT DETAILS				
Surname		Given names		
Maiden/Previous name		Date of birth	Place of birth	
		1 1		
ANY PREVIOUS REGISTERED CH	HANGE/S OF NAME, DEED POLL OF	R NAMES KNOWN BY	USE, REPUTE OR THE	ROUGH MARRIAGE
Old name	New name	Date of change	Place of change	Method of change

PART B - DE	CLARA	TION E	BY AF	PLI	CA	NT								
l,	being a (occupation)													
of (address)														Postcode
hereby apply to the Registrar-General for registration of a change of my name to:														
New full name														
I acknowledge and de provided on this form in support of this app Marriage Registries, t my consent for these satisfied that my appl	relates to r lication to the he Passport agencies to	me and is on the Austral ts Office, to release a	correct. ian Fede he Depa ny relev	I under eral Po ertment ant infe	ersta lice (t of Ir orma	nd that AFP) o mmigra tion to	the F r age ation a the F	Registrai ncies ind Ind Citiz Registrar	r-Ge clud ens -Ge	nera ing, hip, a	I may p but not and Mo	orovio t limit otor V	de this form a ted to, other E 'ehicle Regist	nd any evidence Jirth, Death and Ties. I also give
Declared at (suburb/town)					_	State/Territory								
Applicant's signature	Applicant's signature				<u> </u>	Dated on								
Before me (signature of witness)				_	Qualification of witness (JP, Solicitor, Police Officer or BDM Staff)									
Telephone contact of witness				<u>-</u>	Full name of witness									
Address of witness														
PART C - PA	YMENT	DETA	ILS											
If you are applying cash, credit care Registrar-Genera	d, EFTPOS	, money o	order o	r <mark>ch</mark> eq	ue, a	all che	ques	and mo	one	y ord	ders sl	noul	d be made pa	ayable to the
Mastercard	ard Visa Card						Amount \$							
Card Number													Expiry Date	/
Name of Cardholder						Signa		f						