



BIRTHS, DEATHS AND MARRIAGES
OFFICE OF REGULATORY SERVICES
Department of Justice and Community Safety
**APPLICATION TO REGISTER A
CHANGE OF NAME FOR AN ADULT**



Form 206 - CNA

Births Deaths and Marriages Registration Act 1997
Births Deaths and Marriages Registration Regulation 1998

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.

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 it may appear on birth certificates subsequently issued by that jurisdiction.

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. 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 agencies 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.

Documents provided as proof of identity may have their authenticity verified through Certificate Validation System (CVS) and the National Document Verification System (DVS). Documents issued by this office may also be verified by external agencies using CVS and/or DVS.

REASONS YOUR APPLICATION MAY BE REJECTED

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

- Have previously offended;
- Have significant association with an offender;
- Are unable to produce the required proof of identity documents;
- Have failed to advise of previous changes of name in the ACT or other jurisdiction;
- Are currently involved in an investigation;
- Have outstanding debts;
- Desired name is a prohibited name;
- A registered change of name has been performed in the last 12 months;
- Have failed to prove ACT residency for 3 or more months.

If you are able to demonstrate that the information used by the Registrar General has been superseded, then the change of name application can be reviewed.

PRIVACY INFORMATION.

The *Births, Deaths and Marriages Registration Act 1997* authorises the Registrar-General to collect the information required by this form. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988 (C'wlth)*. The Registrar-General may provide identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances. Documents provided as proof of identity may have their authenticity verified through Certificate Verification System (CVS) and the Document Verification System (DVS). Documents produced by this office may also be verified by external agencies using CVS and/or DVS.

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.

- You must provide your original birth certificate
- 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 are a permanent resident of Australia, you should provide a Certificate of Evidence of Resident Status, available from the Department of Immigration and Citizenship.
- If not born in the ACT, we require 3 forms of evidence proving residency in the ACT. All evidence of residency must exceed 3 months but not be older than 6 months.
- 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.
- 3 forms of current identification must be provided upon application. At least one form must be from list 1 and 2 other forms of identification from list 2. In cases where a person is unable to provide enough forms of identification please contact this office.

List 1	List 2	
Australian Drivers Licence	Medicare Card	Security Guard Licence
Australian Passport	Credit Card or Account Card	Tertiary Education Institution Identification
Firearms Licence	Centrelink Card	Department of Veterans Affairs Card
Proof of Age Card		

CONTACT INFORMATION

Send completed forms to the Office of Regulatory Services **GPO Box 158, Canberra ACT 2601**
Lodge in person at the Office of Regulatory Services: **255 Canberra Avenue, Fyshwick ACT 2609**
Office Hours: **9:00am to 4:30pm Monday to Friday**
General enquiries telephone number: **(02) 6207 0460**
Website address: www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- If completing this form by hand please use a blue or black pen only.
- This office will not accept lodgement of this form if it is not completed in full.
- Any alteration to information provided on this form must be struck through with a blue or black pen and substitute information must be clear and all parties must sign in the margin. Do not use white out.
- If you are lodging this application in person you must supply original documentation.
- If you are lodging this application in person, staff of Births Deaths and Marriages if within the office may witness signatures.
- If sending your application by post you must have documents certified as true copies of the originals by a Justice of the Peace, Solicitor or Police Officer.
- If sending your application by post a Justice of the Peace, Solicitor or Police Officer must witness all signatures.

FEES CURRENT UNTIL 30 JUNE 2009

The fee to lodge an application to change a 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 \$17.00 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.

If you require further information or need advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.



BIRTHS, DEATHS AND MARRIAGES
OFFICE OF REGULATORY SERVICES
Department of Justice and Community Safety
**APPLICATION TO REGISTER A
CHANGE OF NAME FOR AN ADULT**



Form 206 - CNA

*Births Deaths and Marriages Registration Act 1997
Births Deaths and Marriages Registration Regulation 1998*

Registration Number (Office use only)	
---	--

Applicants Contact Number	
----------------------------------	--

DETAILS OF APPLICANT AT THE TIME OF THEIR BIRTH

Surname at Time of Birth		Given Name(s) at Time of Birth	
Date of Birth	Place of Birth	Sex	
/ /		<input type="checkbox"/> Female <input type="checkbox"/> Male	

CURRENT DETAILS OF THE APPLICANT (The name you currently use)

Current Surname	Current Given Name(s)

DESIRED NAME (The name you would like to be known as after the change of name has been registered)

Surname	Given Name(s)

APPLICANTS CONTACT DETAILS

Current Residential Address		Postal Address (if different from residential address)	
	Postcode		Postcode
Telephone Contact Number During Business Hours		E-mail Address	

DETAILS OF APPLICANTS MOTHER

Surname	Given Names	
Former Names if Any	Date of Birth	Place of Birth
	/ /	

DETAILS OF APPLICANTS FATHER **PARENT**

Surname	Given Names	
Former Names if Any	Date of Birth	Place of Birth
	/ /	

ANY PREVIOUS CHANGES OF NAME (Includes Deed Poll, Registered Change of name, names known by use, repute or through Marriage)

Old Name	New Name	
Place of Change	Method of Change (ie, Deed poll)	Date of Change
		/ /

Old Name	New Name	
Place of Change	Method of Change	Date of Change
		/ /

Old Name	New Name	
Place of Change	Method of Change	Date of Change
		/ /

DECLARATION BY APPLICANT

I, (full name)	being a (occupation)
of (address)	

hereby apply to the Registrar-General for registration of a change of name to:

New Full Name

I acknowledge and declare that I have read the general information document provided with this form and the information I have provided on this form relates to me and is correct. I understand that the Registrar-General may provide this form and any evidence in support of this application to the Australian Federal Police (AFP) or agencies including, but not limited to, other Birth, Death and Marriage Registries, the Passports Office, the Department of Immigration and Citizenship, and Motor Vehicle Registries. I also give my consent for these agencies to release any relevant information to the Registrar-General that he/she may require in order to be satisfied that my application is not being sought for fraudulent or improper purposes.

Signed (applicants signature)	Declared at (place)	on (date)
Before me, (signature of witness)	Full Name of Witness	
Qualification of Witness (Justice of the Peace, Solicitor, Police Officer or BDM Staff)		
Address of Witness		

PAYMENT DETAILS

<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	Expiry Date	____ / ____	Amount	\$
Cardholder Name		Cardholder Signature			
Card Number					

PLEASE NOTE: Payments may be made by cheque, money order or credit card if lodged by post, or also by cash or EFTPOS if lodged in person. Applications paid by personal cheque will be held for 7-10 working days for the cheque to clear.