Supplemental Affidavit

I, (Delete and Insert Parent One Name) a (Delete and Insert Parent One Description)

Of (Delete and Insert Parent One Address)

Aged eighteen years and upwards make Oath and say as follows:

1. I confirm I am the parent of (Delete and Insert Minor New Name) and wish to change the said minors name from (Delete and Insert Minor Old Name) to (Delete and Insert Minor New Name)

2. I confirm that (Delete and Insert Parent Two Name) of (Delete and Insert Parent Two Address) is the said minors parent and gives their consent to this name change.

3. (Delete and Insert the present relationship between the parents)

4. The minor resides at (Delete and Insert Minors Address)

Sworn before me by the said
(Delete and Insert Parent One Name)
On the
(Delete and Insert Date of Swearing)
at
(Delete and Insert Address of Swearing)
Before me a Commissioner for Oaths/Practicing Solicitor and the deponent
DELETE AS APPROPRIATE –
is personally known to me /
is identified to me by
Whom I personally know /
Whose identity has been established to me by reference to a relevant document containing a photograph

_____
Deponent signature

_____
Commissioner for Oaths/Practising Solicitor