

KALISPEL TRIBAL COURT

In Re the Matter of:

Petitioner/Plaintiff,

Date of Birth.

No. _____

**Petition for Change of Name
(Adult)**

I. Motion

1.1 I am the petitioner/plaintiff in this action.

Full Legal Name: _____

Social Security Number: _____ Age: _____

1.2 I am asking the Court to change my name to: _____.

II. Basis for Motion

2.1 I have significant ties to the Kalispel Indian Community.

2.2 I am over the age of 18 and (check one)

an enrolled Tribal Member of a Federally recognized Tribe.

Tribe: _____

Enrollment Number: _____

the spouse of a Tribal Member of a Federally recognized Tribe.

Spouses Name: _____

Spouses Tribe: _____

Spouses Enrollment Number: _____

the descendant of a Tribal Member of a Federally recognized Tribe.

Ancestor's Name: _____

Ancestor's Tribe: _____

Ancestor's Enrollment Number: _____

2.3 The reason I am petitioning the court to change my name is:

III. Declaration

I declare that,

3.1 I am not making this request to defraud creditors or for any illegal purposes.

3.2 In addition to the information in the above Basis for Motion, I would like the court to consider the following:

I declare under penalty of perjury under the laws of the Kalispel Tribe and state of Washington that the foregoing is true and correct.

Signed at (city) _____, (state) _____ on (date) _____.

Signature

Print or Type Name

Mailing Address: _____

Phone Number: _____

Email Address: _____