# Child Change of Name by One Parent

# Birth Registered Overseas

Pursuant to s24 of the *Births, Deaths and Marriages Registration Act 1996*

1. A Parent/Legal Guardian must complete all pages and sign the form in front of a witness over the age of 18 years. If you do not sign the change of name application in front of a witness then it will not be registered. Original application forms must be lodged at a Births, Deaths and Marriages (BDM) counter or posted in. Please **do not** Fax or Email in application forms.
2. One parent may change their child’s name providing they are the sole parent named in the child’s birth registration, the other parent of the child is deceased or the Court approves that one parent may change the name. A legal guardian may change a child’s name providing the parents of the child are deceased, cannot be found or are unable to exercise their parental responsibilities. The Registrar must not register a change of name for a child if he or she has knowledge that some other person has full/partial custody or guardianship.
3. The child’s **original** birth certificate **must** be presented for sighting. If the certificate is from an overseas country and in a language other than English, an original translation of the certificate by a certified translating agency must also be produced.
4. A reason for the change of name must be provided. Statements like ‘Personal’, ‘I want to’, ‘religion’ or similar are **not** acceptable reasons for applying to register a change of name.
5. Evidence of identificationfor the parent/guardian/other interested parties **is to be sighted** prior to a change of name being processed. See page three (3) for full identification requirements.
6. A Parent/Legal Guardian lodging a change of name application for a child whose birth is **not** registered in the Northern Territory (NT) must provide evidence of residency for at least **twelve (12) consecutive months**. Applications where the period of residency in the NT is less than twelve (12) consecutive months are subject to the Registrar’s discretion in appropriate circumstances.
7. A Parent/Legal Guardian of a child born overseas whose birth is **not** registered in the NT or any other Australian jurisdiction must be either an Australian Citizen or hold a Permanent Residency Visa. Applications that do not meet these requirements are subject to the Registrar’s discretion in appropriate circumstances.
8. A Parent/Legal Guardian may have the child’s birth registration noted with the new name if the child was born in Australia. When born interstate, the relevant state/territory will be notified but any further documentation and/or fees will need to be negotiated directly with that state or territory.
9. Court Orders, Death Certificates, proof of guardianship and other documents which may be required to accompany the name change registration must be **originals**. These documents will be returned to you.

**Important Information**

* If you have registered a change of name for your child with any Registry in Australia within a period of **twelve (12) months**, any further applications for change of name at any Registry in Australia within that twelve (12) month period will be refused, except with the consent of the Registrar upon consideration of the applicant’s reasons for the change or if your child has 3 changes of name registered whether in the NT or another Australian State or Territory or both after 31 August 2022.
* The child’s consent to the change of name may also be required, unless the child is unable to understand the meaning and implications of the change of name. In the NT, if the child is 14 years of age or more, then consent from the child is required.
* The signature and identification of any other person who is required to consent to the use and change of the child’s name must be included with the application.
* The Parent/Legal Guardian must also provide details of any previous name changes for the child.
* Please refer to the website [www.nt.gov.au/law/bdm](http://www.nt.gov.au/law/bdm) for the current fees. For lodgement, registration or collection of documents, or if you have any questions regarding your application, please contact one of the following offices:

|  |  |  |
| --- | --- | --- |
| **DARWIN**Phone **(08) 8999 6119** Fax **(08) 8999 6324** | **PALMERSTON***\*Friday only 8 am to 12 noon*Phone Darwin office on **(08) 8999 6119**  | **ALICE SPRINGS**Phone **(08) 8951 5338** |
| **Office of Births, Deaths & Marriages**Nichols Place Cnr of Cavenagh & Bennett Streets Darwin NT 0800GPO Box 3021Darwin NT 0801  | **Palmerston Community Care Centre**Palmerston Health PrecinctGurd Street, Farrar NT 0830 | **Office of Births, Deaths & Marriages**Ground Floor Centrepoint BuildingCnr Hartley Street & Gregory Terrace Alice Springs NT 0870PO Box 8043Alice Springs NT 0871 |

## Checklist for Child Change of Name – Birth Not Registered in NT

Before you lodge the application for a child’s change of name, please ensure you have all of the required documentation listed below.

Tick the appropriate box to indicate what documents you are lodging.

**If your child’s birth is not registered in the Northern Territory you must provide:**

□ Completed application form that is signed and witnessed by a person over 18 years

□ Current Identification from the parent/guardian/other interested parties

□ Birth Certificate and translation if required

□ Citizenship Certificate or Permanent Residency Visa

□ Court Order, Death Certificate, proof of guardianship (where applicable)

□ Twelve (12) consecutive months proof of residency in the Northern Territory

□ Payment

□ Child’s consent (if over 14 years old)

**Please Note:** if you fail to meet the above requirements, your change of name may not be accepted.

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|  |  |  |  |
| --- | --- | --- | --- |
| **Requirement** | **Yes**  | **No** | **Notes** |
| Completed Application |  |  |  |
| Birth Certificate  |  |  |  |
| Translation (if applicable) |  |  |  |
| Citizenship Certificate |  |  |  |
| Permanent Residency Visa |  |  |  |
| Proof of Residency |  |  |  |
| ID |  |  |  |
| Court Order (if applicable) |  |  |  |
| Death Certificate (if applicable) |  |  |  |
| Guardianship (if applicable) |  |  |  |
| Payment |  |  |  |
| Child’s Consent (if applicable) |  |  |  |

## Identification Requirements

All applications are to be supported by sufficient means of identification by the parent/guardian/other interested parties. An applicant must provide a minimum of three (3) types of acceptable identification from the lists below.

Identification must include at least one (1) type of photo ID from Category A and at least two (2) types of ID from Category B.

* If applying in person, you must provide original identification documents.
* If applying by post, you must provide certified photocopies of each identity document. **Do not** post original documents unless it is a Birth Certificate, previous Change of Name Certificate, Court Orders or proof of guardianship.

|  |  |
| --- | --- |
| **Category A – Provide at least ONE**  | **Category B – Provide at least TWO**  |
|  |  |
| Passport (Australian or Overseas Issued) | Australian Birth Certificate |
| Australian Drivers Licence | Australian Citizenship Certificate |
| Firearms Licence | Immi Card |
| Tertiary Student ID Card with Photo | Centrelink Health Care Card |
| Australian Evidence of Age Card (18+ Card) | Centrelink Pension/Concession Card |
| Photographic ID issued by Larrakia Nation or Tangentyere Council | Government Employee IDOverseas Birth Certificate with Translation |
| Police Service ID | Medicare Card |
| Defence Force ID | Credit Card/Debit Card or Passbook |
| NT Ochre Card | Phone Bill/Electricity Bill/Rates Notice |
| (Any other Photographic ID deemed by the Registrar to be sufficient) | Bank StatementChange of Name Certificate or Deed Poll |
|  | Tax Assessment Notice |
|  | ID Letter from an Aboriginal Community |
|  | Student Letter of Enrolment |
|  | NT Security ID |
|  | (Any other evidence deemed by the Registrar to be sufficient) |

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| --- | --- | --- | --- |
| **Identification Type** | **Category** | **ID Number** | **Where issued** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
| **7** |  |  |  |  |
| **8** |  |  |  |  |
| **9** |  |  |  |  |
| **10** |  |  |  |  |

## Proof of Residency Requirements

If your child’s birth was **not** registered in the NT then you must supply evidence of residency for at least twelve (12) consecutive months.

If your child was born overseas and their birth was not registered in the NT or any other Australian jurisdiction, you must also include with the application either a Citizenship Certificate or Permanent Residency Visa.

If applying in person, you must bring **original** documents.If applying by post, you must provide **certified photocopies** of each document. Do not post original documents.

**Evidence of residency for a parent/guardian can include the following:**

* Bank Statements covering the required residency period from a current passbook/credit card/ATM or Cheque Account. The statements must include the parent/guardian name, a residential or postal address and evidence of transactions within the NT.
* Electricity and/or Water Bills covering the required residency period. The utility bills must include the parent/guardian name, an address and proof of payment.
* Official Summaries of Pay from an Employer located in the NT that cover the required residency period. The pay summaries must include the parent/guardian name, the name of the employer and/or ABN Number and dates.

**Please Note:** The Registrar may make enquiries into the validity of the proof of residency documents provided by an applicant if required.

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| --- | --- | --- |
| **Residency Document Type** | **Date Range** | **Organisation Name** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |

**Please Note:** complete all sections below and print clearly in BLOCK LETTERS. Whiteout is **not** to be used on this form so please ensure that any corrections made are crossed out and initialled.

## Applicant Details

|  |  |
| --- | --- |
| **Full Name of Applicant** (Parent/Guardian) | **Postal Address** |
| **Contact phone No’s.**Home/Work Mobile |
| **Full Name of Child** (before change) |
| **Reason for name change** (see Note 4 on Instruction sheet) |
| **Certificate to be Collected from :** DARWIN PALMERSTON (Friday Mornings Only) ALICE SPRINGS **Certificate to be:** POSTED LAMINATED |

Have you changed the child’s name within the last twelve (12) months? **Yes** **No**

Have you changed the child’s name more than 3 times since August 2022? **Yes** **No**

If the child has been known by and/or legally using any other name, please specify below:

|  |  |
| --- | --- |
| **Previous Surname** |  |
| **Previous Given Name/s** |  |
| **Country/State Name Change Registered**  |  |
| **Registration No. & Date** (if known) |  |
| **Previous Surname** |  |
| **Previous Given Name/s** |  |
| **Country/State Name Change Registered**  |  |
| **Registration No. & Date** (if known) |  |
| **Previous Surname** |  |
| **Previous Given Name/s** |  |
| **Country/State Name Change Registered**  |  |
| **Registration No. & Date** (if known) |  |

|  |
| --- |
|  **Visa MasterCard Cheque / Money Order \***American Express / Bank Card **NOT ACCEPTED****Card No. \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ Expiry Date \_\_ \_\_ / \_\_ \_\_ CCV \_\_ \_\_ \_\_** **Card Holder Name in full** (please print) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| --- | --- |
| APP REG NO: | CON REG NO: |

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##  Change of Name Details

|  |  |
| --- | --- |
| Child’s Previous Surname |  |
| Child’s Previous Given Name(s) |  |
| Child’s New Surname |  |
| Child’s New Given Name(s) |  |
| Child’s Surname at Birth |  |
| Child’s Given Name(s) at Birth |  |
| Child’s Date of Birth |  **(Day) (Month) (Year)** |
| Sex of the Child |  Female  |  Male |   Non Binary Unspecified  |
| Child’s Full Place of Birth |  |
| Child’s Current Residential Address |  |
| Full Details of Parents/Guardians |
| Full Name of Parent/Guardian |  |
| Current Residential Address of Parent/Guardian |  |
| If the child is born interstate, do you wish to have the Birth Registration amended to show the new name? | Yes | No  |

## Circumstances Relating to Change of Name by One Parent/Guardian

□ I am the sole parent named in the registration of the child’s birth (child’s birth certificate attached).

□ The other parent of the child is deceased and no other person has legal responsibilities towards the child (copy of other parent’s death certificate attached).

□ The other parent (or some other person) has custody or guardianship rights or the equivalent but would not object and/or consents to the change of name (appropriate evidence, as required by the Registrar, is attached).

□ The Court approves the proposed change of name to be registered by one parent/guardian (Court Order Attached).

□ I, not being a parent of the child, am the guardian of the child. (Court Order attached or other proof of guardianship where the parents are deceased, cannot be found or cannot exercise their parental responsibilities).

**PRIVACY STATEMENT**

The Office of Births, Deaths & Marriages is collecting the information on a change of name form so that it can determine your eligibility to register the requested change of name for your child and to prevent fraud. If all the information requested is not completed then the change of name may not be registered. The collection of the information is required by the Northern Territory *Births, Deaths and Marriages Registration Act 1996*. The information is recorded and preserved in the Register of Changes of Name and in appropriate cases, may be accessed by government agencies, private organisations and members of the public in accordance with the Access Policy issued under the Act. Failure to provide the information may result in incomplete registration entries and the non-issue of certificates. The personal information provided on this form can be accessed by you on request. If you have any queries, please contact the Deputy Registrar on (08) 8999 6119.

**Please Note:** complete all sections below and print clearly in BLOCK LETTERS. Whiteout is **not** to be used on this form so please ensure that any corrections made are crossed out and initialled.

## Parent/Guardian Declaration

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Solemnly and sincerely declare that I:

* Understand that the NT Registry of Births, Deaths and Marriages may confirm or verify the validity of any document provided with this application in order to establish identity.
* Declare that I, the parent/guardian of the child, on my behalf as well as for and on behalf of the child, absolutely renounce and abandon the use of the child’s old name and assume the new name in its place and declare that I and the child will at all times, in all records, deeds and instruments, in all actions, suits and proceedings, in all dealings and transactions and upon all occasions use and sign the new name as the name of the child and authorise and request all persons to designate and address the child by the new name.
* Will not seek to use the new name of the child as stated in this application form for a fraudulent or improper purpose.
* Understand that it is a punishable offence to give false or misleading information in this application or supporting documents.
* Certify that there are no prevailing court orders relating to the naming of the child and that to my knowledge and belief there are no other persons, apart from those named in this document, who would be required to consent to the change of name of the child.

This declaration is true and I know it is an offence to make a statutory declaration knowing it is false in a material particular. I make this solemn declaration by virtue of the *Oaths, Affidavits and Declarations Act 2010*, conscientiously believing the statements contained in this declaration to be true.

I also acknowledge that persons who wilfully make a false statement in any material particular are guilty of a crime and liable to imprisonment for 3 years (section 119 of the *Criminal Code Act 1983*).

Furthermore, a person who does anything to a Statutory Declaration that result in it becoming false or misleading, is liable to a penalty of a fine or imprisonment, or both (section 27 *Oaths, Affidavits and Declarations Act 2010* - Maximum penalty: 400 penalty units or imprisonment for 4 years).

Declared at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **SIGNATURE OF PARENT/GUARDIAN** **✍** | **SIGNATURE OF WITNESS:****✍** |
|
| **DATE:**\_\_\_\_\_\_\_\_\_\_\_ | **FULL NAME OF WITNESS:** |
|  | **WITNESS PHONE NO:** |
|  |  |

|  |
| --- |
| **NOTE: This declaration may be witnessed by any person who is at least 18 (eighteen) years of age.**  |
| **NOTE: This written statutory declaration must comply with Part 4 of the *Oaths Affidavits and Declarations Act 2010.*** |
| **NOTE: Making a declaration knowing it is false in a material particular is an offence for which you may be fined or imprisoned.** |

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**MEMORANDUM**

The within Change of Name numbered was registered at Darwin, Northern Territory

The day of 20

 Deputy Registrar of Births, Deaths & Marriages / / 20

**Please Note:** complete all sections below and print clearly in BLOCK LETTERS. Whiteout is **not** to be used on this form so please ensure that any corrections made are crossed out and initialled.

## Consent from the Other Person with an Interest – if applicable

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Full Name) (Insert address)

Being the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_hereby consent to the change of name of

 (Guardian/Step-parent/Person with an interest)

the child to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Child’s new name in full)

|  |  |
| --- | --- |
| **SIGNATURE OF GUARDIAN/OTHER PERSON** **✍** | **SIGNATURE OF WITNESS:****✍** |
|  |
| **DATE:**\_\_\_\_\_\_\_\_\_\_\_ | **FULL NAME OF WITNESS:** |
|  | **WITNESS PHONE NO:** |

**CONSENT FROM THE CHILD** (if applicable)

This section must be completed if the child is over the age of 14 years.

This section need not be completed if the child is unaware of the meaning and implication of the name change.

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby consent to the change of name described in

 (Current Full Name of the Child)

this application.

|  |  |
| --- | --- |
| **SIGNATURE OF THE CHILD** **✍** | **SIGNATURE OF WITNESS:****✍** |
|  |
| **DATE:**\_\_\_\_\_\_\_\_\_\_\_ | **FULL NAME OF WITNESS:** |
|  | **WITNESS PHONE NO:** |