

BIRTHS, DEATHS AND MARRIAGES
OFFICE OF REGULATORY SERVICES
Justice and Community Safety Directorate

APPLICATION TO REGISTER A CHANGE OF NAME FOR A CHILD

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

Form 207 - CNC

GENERAL INFORMATION

This form can only be used to register a change of name for a child 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 the child was born overseas they must be an Australian citizen or permanent Australian resident.

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 purposes. Under the *Births, Deaths and Marriages Registration Act 1997*, certain restricted people require approval from the Director-General of the Justice and Community Safety Directorate in order to apply for a change of name. A restricted person is one who is serving a sentence of imprisonment including periodic detention or is the subject of a parole order.

If the application to register a change of name is approved, an entry will be created in the change of name register. If the child was born in the ACT, the new name will also be noted on their birth registration and will appear on all birth certificates issued after registration of the change of name. If the child was 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.

PARENTAL CONSENT AND CONSENT FROM A CHILD OVER 14 YEARS OF AGE

If the child's birth registration includes details of two parents, both parents must apply and consent to the registration of the change of name. One parent may apply if they are the only parent on the child's birth registration or if one parent is deceased, in which case a death certificate is required. If either parent cannot be found or refuses to consent to the application to change the child's name, a Court Order approving the proposed change is required. If the child has attained the age of 14 years, the child must also consent to the application to change their name.

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

This form may be directed to the AFP and other 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..

If you are able to demonstrate that the information used by the Registrar-General as part of the decision making process 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. This may include information from ACT Corrective Services, where the child in question is a restricted person under the Act. 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, ACT Corrective Services, the Director-General of the Justice and Community Safety Directorate and authorised organisations that have legal authority to request information under prescribed circumstances.

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.

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 the child's identity. This includes, but is not limited, to the following:

- Your child's 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 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.
- If the child is not born in the ACT, we require two forms of evidence, from you as the parent, proving residency in the ACT.
- If you, as the parent 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.
- Each parent must provide three forms of current identification upon application. At least one form from each parent must be Primary Proof of identification and two other forms of Secondary Identification. In cases where a person is unable to provide enough forms of identification please contact this office.

Primary Proof of Identity	Secondary Proof of Identity	Proof of Residency	
Photographic Drivers Licence issued in	Current Medicare Card	A photographic drivers licence issued in the ACT	
Australia(current or expired up to 2 years	Current Credit Card or Account Card	ACT Rates Notice or Land Tax valuation Notice	
Australian or Overseas Passport (current or expired up to 2 years)	Current Centrelink or Department of Veteran Affairs Concession Card	Contract or Purchase, Current Lease or Rental Documentation issued by rental estate agency or ACT Government	
Australian Citizenship Certificate or Naturalisation Certificate	ACT Services Access Card issued by ACT Government (Asylum seekers)	Australian Taxation Assessment Notice (last or current financial year or taxi file number notice	
Dept of Immigration and Citizenship travel documentation (valid up to 5 year after issue)	Australian-issued Security Guard/Crowd Controller Licence (with photo)	Utility accounts relating to nominated address and paid within the last 6 months	
Australian Birth Certificate	Australian Issued Firearm Licence (with photo)	Pay Television Account or Landline Telephone Account paid within the last 6 months	
Dept of Immigration and Citizenship Certificate of Evidence of Resident Status	Current Student Identity Document (with photo)	Home Contents Policy dated within 1 year of application	
Police Officer Photo Identity (ACT only)	Current State, Territory or Federal Government employee photo-	Motor Vehicle Insurance Policy dated within 1 year of application	
Australian Proof of Age Card	identity card	Current Health/life Insurance Policy or renewal Notice within 1 year of application	

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 3000
Website address: www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- If completing this form by hand please use 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 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 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 person who is authorised under the *Statutory Declarations Act 1959 (C'wlth)* (eg. 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 2015

A fee applies to lodge an application to change a name. This fee is non-refundable regardless of whether your application is registered. Upon registration a further fee is payable to obtain the certificate of change of name or an updated birth certificate. If delivery of the certificate is required by mail, an additional registered person-to-person postage fee applies. If the certificate is to be sent overseas, an international express post fee will apply. For a list of fees for a standard certificate, please refer to the Office of Regulatory Services fee schedule. Services Payment can be made by cash, credit card, EFTPOS, money order or cheque. All cheques should be made payable to the Office of Regulatory Services. Applications paid by personal cheque will be held for 7-10 working days to allow time for the cheque to clear.



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Registration Number (Office use only)		Applicants Conta	act Number		
DETAILS OF CHILD AT TH	E TIME OF THEIR BIRTH				
Surname at Time of Birth	1	Given Name(s) at Time of Birth			
Date of Birth	Place of Birth	,	Sex	Sex	
1 1				☐ Male ☐ Female ☐ Unspecified/ Indeterminate/intersex	
CURRENT DETAILS OF CHILD (The name the child currently use)					
Current Surname		Current Given Name(s)			
DESIRED NAME (The name y	you would like the child to be known as after the change of	name has been registere	ed)		
Surname		Given Name(s)			
RESTRICTED PERSON STA	ATUS (please attach Director-General appro	val if required)			
Is the child currently serving a sentence of imprisonment, or on parole? YES NO If yes, please attach approval from the Director-General of the Justice and Community Safety Directorate for this application.					
DETA ILS OF APPLICANTS	MOTHER				
Surname		Given Names			
Former Names if Any		Date of Birth	te of Birth Place of Birth		
		1 1			
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 or names known by use, repute)					
Old Name		New Name			
Place of Change		Method of Change (ie, Deed poll) Date of Change			
		1 1			
CONSENT OF THE CHILD IF 14 YEARS OF AGE OR OLDER					
I consent to my name being changed to the new name that has been stated above					
Signature of Child		Signature of Witness (Solicitor, JP, Police Officer or BDM staff)			

DECLARATION BY MO	THER					
I, (full name)			being a (occupation)			
of (address)						
hereby apply to the Re	egistrar-General fo	or registration of a chang	ge 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 myself and my child, 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 this application is not being sought for fraudulent or improper purposes.						
Signed (applicants signatur	e)		Declared at (place)	on (date)		
Before me, (signature of v	efore me, (signature of witness) Full Name of Witness					
	Qualification of Witness Must be authorised under the Statutory Declarations Act 1959 (C'wlth) (eg Justice of the Peace, Solicitor, Police Officer) or BDM Staff					
Address of Witness	· · · · · · · · · · · · · · · · · · ·					
DECLARATION BY FAT	HER PARENT [
I, (full name)	being a (occupation)					
of (address)						
hereby apply to the Re	egistrar-General fo	or registration of a chang	ge 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 myself and my child, 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 this application is not being sought for fraudulent or improper purposes.						
Signed (applicants signatur	re)		Declared at (place)	on (date)		
Before me, (signature of v	witness) Full Name of Witness					
Qualification of Witness Must be authorised under the Statutory Declarations Act 1959 (C'wlth) (eg Justice of the Peace, Solicitor, Police Officer) or BDM Staff						
Address of Witness						
PAYMENT DETAILS						
☐ Visa ☐	Mastercard	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.						