

A name change request must be submitted to the WSBA in writing and accompanied by a signature requesting the change. Please complete all applicable information listed below and **return to the Regulatory Services Department** at the WSBA.

This form is for changes to WSBA and court records only. Please print clearly and fill-out all fields appropriate for this name change. Thank you.

License Number#: _____ **Effective date of change** _____

PREVIOUS NAME:

First Name: _____

Middle Name: _____

Last Name: _____

NEW NAME:

Prefix (Mr., Ms., Capt, etc.): _____

First Name*: _____

Middle Name: _____

Last Name*: _____

Suffix (Jr., Sr., etc.): _____

Nickname: _____

(* Required)

Signature: _____ **Date:** _____

