Canada	Form 4 [Change of Name Act subsection 5(2)] Consent Form [to be completed by person with custody or access] [please print, see instruction sheet]		
Province of Prince Edward Island			
I			
[first name]	[middle name]	[surname]	
of			
[street]	[city/town/village]	[province/territory/country]	[postal code]
telephone number	email		
HEREBY CONSENT TO the change	of name of my son/daughter	/ward/or other person in my lawfu	ıl custody
who was born on	[date]		
from (present name)			
[first name]	[middle nam	[surname]	
to (proposed name)			
[first name]	[middle name	[surname]	
Section (Below) f	or Completion At Office with	Notary Public or Commissioner o	f Oaths
I share custody of this child or per	son with		I
have access rights to this child or	person with		
Commissioner of Oaths & Affidavi	ts	Applicant	