The Change of Name Regulations, 1996

being

Chapter C-6.1 Reg 1 (effective November 15, 1996) as amended by Saskatchewan Regulations 46/2002, 45/2004; 49/2007; 103/2010 and 2/2020.

NOTE:

This consolidation is not official. Amendments have been incorporated for convenience of reference and the original statutes and regulations should be consulted for all purposes of interpretation and application of the law. In order to preserve the integrity of the original statutes and regulations, errors that may have appeared are reproduced in this consolidation.

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CHAPTER C-6.1 REG 1

The Change of Name Act, 1995

Title

1 These regulations may be cited as *The Change of Name Regulations, 1996*.

Interpretation

2 In these regulations, **"Act"** means *The Change of Name Act, 1995*.

26 Jly 96 cC-6.1 Reg 1 s2.

Change of name registry

2.1 The change of name registry consists of the following records:

(a) changes of name by application or changes of name by election that are registered pursuant to the Act or any former *Change of Name Act*;

(b) forms filed pursuant to the Act or any former *Change of Name Act* or any former *Vital Statistics Act* respecting a change of name;

(c) changes of name or registrations that are annulled by the director pursuant to the Act or any former *Change of Name Act*;

(d) orders issued by the director pursuant to the Act or any former *Change of Name Act* for the following purposes:

(i) to annul a change of name or a registration made pursuant to the Act or any former *Change of Name Act*;

(ii) to require the return of any certificate or duplicate certificate that has been issued pursuant to the Act or any former *Change of Name Act*;

(e) annual indexes that are maintained by the director pursuant to the Act or any former *Change of Name Act*;

(f) orders issued by a court of competent jurisdiction pursuant to the Act or any former *Change of Name Act*;

(g) notices of motion served on the director pursuant to the Act or any former *Change of Name Act*;

(h) documents accepted by the director as information or documentary evidence pursuant to the Act or any former *Change of Name Act* that are submitted along with a change of name by application;

(i) paper and microfiche indexes of registrations for a change of name completed pursuant to the Act or any former *Change of Name Act*;

(j) microfilm and electronic copies of the records mentioned in clauses (a) to (i).

8 Oct 2010 SR 103/2010 s3.

Fees

3(1) The fee payable to the director:

(a) for each registration of an application for a change of name, is $125;

(b) for each registration of a change of name made pursuant to the laws of another jurisdiction, is $25;

(c) for each duplicate certificate issued, is $25;

(d) for each certified copy of a notice of surname by a married woman, is $20;

(e) for each certified copy of notice of election of a double surname by a married person, is $20;

(f) for each certified copy of a joint declaration with respect to a spousal relationship filed pursuant to subsection 20(2) of the Act, is $25;

(g) for each certified copy of a declaration with respect to the termination of a spousal relationship filed pursuant to subsection 23(3) of the Act, is $25.

(2) In addition to the fee prescribed in clause (1)(a), a person who applies for a change of name shall pay to the director, for publishing in the Gazette the names of persons who are 15 years of age or older at the time of the application and who are listed on the application, a fee in the amount of:

(a) $10.70 for the first person 15 years of age or older who is listed on the application; and

(b) $3.21 for each additional person 15 years of age or older who is listed on the application.

(3) The fee payable to the director for issuing a certified copy or photographic print of any document for which no fee is otherwise prescribed is $50.

(4) A person is exempt from paying the fees mentioned in subsections (1) to (3) with respect to an application if:

(a) the person's application is made to alter or add to the given name of a child whose birth has been registered pursuant to *The Vital Statistics Act, 2009* or *The Vital Statistics Act, 1995* and the application is received by the director within one year after the date of the child's birth; or

(b) the person provides evidence that is satisfactory to the director that:

(i) the given name or surname printed on the person's certificate of birth issued pursuant to *The Vital Statistics Act, 2009* or any former *Vital Statistics Act* is different from the given name or surname recorded on the person's statement of live birth; and

(ii) the person has used the given name or surname recorded on the person's certificate of birth mentioned in subclause (i) throughout his or her life.

26 Jly 96 cC-6.1 Reg 1 s3; 14 Jun 2002 SR 46/2002 s2; 25 Jne 2004 SR 45/2004 s3; 22 Jne 2007 SR 49/2007 s3; 8 Oct 2010 SR 103/2010 s4.

Forms

4(1) Form C.N. 1 of the Appendix is the prescribed form for the purposes of subsection 6(1) of the Act.

(2) Form C.N. 2 of the Appendix is the prescribed form for the registration of a change of name pursuant to subsection 12(1) of the Act.

(3) Form C.N. 3 of the Appendix is the prescribed form for a certificate of change of name pursuant to subsection 12(4) of the Act.

(4) Form C.N. 4 of the Appendix is the prescribed form for the registration of a change of name effected outside of Saskatchewan for the purposes of subsection15(2) of the Act.

(5) Form C.N. 5 of the Appendix is the prescribed form for a certificate of the registration of a change of name effected outside of Saskatchewan for the purposes of subsection 15(3) of the Act.

(6) Form C.N. 6 of the Appendix is the prescribed form for an application for a duplicate certificate for the purposes of section 16 of the Act.

(7) Form C.N. 7 of the Appendix is the prescribed form for an application pursuant to Part II of the Act made within one year after the date of a child's birth to alter or add to the given name of a child whose birth has been registered pursuant to *The Vital Statistics Act, 2009* or *The Vital Statistics Act, 1995*.

(8) Form C.N. 8 of the Appendix is the prescribed form for an application pursuant to Part II of the Act to amend the given name or surname on a registered statement of live birth to reflect the given name or surname recorded on a certificate of birth issued pursuant to *The Vital Statistics Act, 2009* or any former *Vital Statistics Act*.

26 Jly 96 cC-6.1 Reg 1 s4; 8 Oct 2010 SR 103/2010 s5.

Residency requirement

4.1 Unless otherwise exempted by the Act or these regulations, every person for whom a change of name is being requested in an application for a change of name pursuant to the Act must:

(a) meet the residency requirements of clauses 5(2)(a), (b) and (c) of the Act; and

(b) at the time the application for a change of name is submitted to the director, be a resident as defined in *The Saskatchewan Medical Care Insurance Act*.

8 Oct 2010 SR 103/2010 s6.

Criminal record check

4.2(1) Every application for a change of name of a person 18 years of age or older must be accompanied by a criminal record check for that person in a form satisfactory to the director from one of the following agencies:

(a) the Royal Canadian Mounted Police;

(b) any municipal police service providing policing services in Saskatchewan within the meaning of *The Police Act, 1990*.

(2) The director may require a person:

(a) to be fingerprinted by any agency mentioned in clause (1)(a) or (b); and

(b) to provide the director with any further documentation from the agency mentioned in clause (a) that sets out, in a form satisfactory to the director, any offences for which the person has been convicted.

24 Jan 2020 SR 2/2020 s3.

Exemptions

5(1) A change of name of any of the following persons is exempt from the requirements of subsection 14(1) of the Act if the Minister of Justice or the director appointed pursuant to *The Witness Protection Act* has informed the director that it is in the interest of the administration of justice that the change of name not be made public:

(a) a person who:

(i) has been or will be a witness in a criminal proceeding; or

(ii) has provided information to the police in relation to a criminal investigation;

(b) a person, other than a person mentioned in clause (a), who has participated in or will participate in a criminal proceeding; or

(c) a person who is related to or closely associated with a person mentioned in clause (a) or (b).

(2) A person who is under the age of 15 years when his or her name change is registered pursuant to section 10 of the Act is exempt from the requirements of subsection 14(1) of the Act.

(3) For the purposes of subsection 14(1) of the Act, the director is not required to publish a notice of a change of name in the Gazette if, in the opinion of the director:

(a) publication of the notice would be contrary to the public interest; or

(b) publication of the notice would cause undue hardship for the applicant or any other person who is a subject of the application.

(4) If the director receives an application pursuant to Part II of the Act, the applicant is exempt from the residency requirements of clauses 5(2)(a), (b) and (c) of the Act and every person for whom a change of name is being requested is exempt from the residency requirements of section 4.1 of these regulations if:

(a) the application is to alter or add to the given name of a child whose birth has been registered pursuant to *The Vital Statistics Act, 2009* or *The Vital Statistics Act, 1995* and that application has been made within one year after the date of the child's birth; or

(b) the application is submitted by the subject individual to alter his or her registered statement of live birth to reflect the given name or surname recorded on his or her certificate of birth issued pursuant to *The Vital Statistics Act, 2009* or any former *Vital Statistics Act*.

(5) If the director registers a change of name requested in an application that is submitted for one of the reasons mentioned in clause (4)(a) or (b), that change of name is exempt from:

(a) the requirement pursuant to subsection 12(4) of the Act to issue a certificate to the applicant setting out the change of name; and

(b) the requirement pursuant to subsection 14(1) of the Act to publish in the Gazette a notice of the change of name

26 Jly 96 cC-6.1 Reg 1 s5; 22 Jne 2007 SR 49/2007 s.4; 8 Oct 2010 SR 103/2010 s7.

Refusal to register a change of name

5.1(1) For the purposes of clauses 10(2)(b) and 15(1.1)(b) of the Act, the director may refuse to register a change of name if the director considers that the name given:

(a) might reasonably be expected to cause:

(i) mistake or confusion; or

(ii) embarrassment to any other person;

(b) is sought for an improper purpose; or

(c) is objectionable on other grounds.

(2) Without limiting the generality of subsection (1), the director may refuse to register a change of name if the applicant or any other person 18 years of age or older for whom the applicant is requesting the change of name has been convicted of a designated offence.

(3) For the purposes of subsection (2), **"designated offence"** means an offence listed in paragraph (a), (c), (c.1), (d), (d.1) or (e) of the definition of **"designated offence"** in subsection 490.011(1) of the *Criminal Code*.

(4) If, pursuant to this section, the director refuses to register a change of name, the director shall immediately notify the applicant in writing of the director's decision.

24 Jan 2020 SR 2/2020 s4.

Form for publishing in the Gazette

6 The director shall publish the notice required by section 14 of the Act in a form that specifies the name, former name and date of birth of every person whose name is changed as a result of the registration of a change of name.

26 Jly 96 cC-6.1 Reg 1 s6.

R.R.S. c.C-6 Reg 1 and R.R.S. c.C-6 Reg 3 repealed

7 *The Change of Name Regulations* and *The Change of Name Exemption Regulations, 1990* are repealed.

26 Jly 96 cC-6.1 Reg 1 s7.

Appendix

Form C.N. 1
[*Subsection 4(1)*]

Application for Change of Name

C.N. 1

Government of Saskatchewan
Department of Health
Vital Statistics

Gouvernement de la Saskatchewan
Ministère de la Santé
Services de l'état civil

THE CHANGE OF NAME ACT, 1995
APPLICATION FOR **CHANGE OF NAME**
LA LOI DE 1995 SUR LE CHANGEMENT DE NOM
DEMANDE DE **CHANGEMENT DE NOM**

REFER TO THE INFORMATION ON THE BACK OF THIS FORM • TYPE OR PRINT CLEARLY IN BLUE OR BLACK INK • COMPLETE APPLICABLE SECTIONS
LIRE LES RENSEIGNEMENTS AU VERSO • DACTYLOGRAPHIER OU ÉCRIRE EN LETTRES MOULÉES À L'ENCRE BLEUE OU NOIRE • NE REMPLIR QUE LES SECTIONS APPROPRIÉES

1. TO BE COMPLETED BY APPLICANT:
À REMPLIR PAR LE DEMANDEUR:

I,
Je soussigné(e) _____ _____
Given Name(s) / Prénom(s) Surname / Nom de famille Tel No. - Home / N° de tél. - domicile

of
du _____ _____
Street / Rue City, Town or Village / Ville ou village Postal Code / Code postal Tel No. - Business / N° de tél. - travail

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

Name of Father
Nom du père _____

Maiden Name of Mother
Nom de jeune fille de la mère _____

make application under the provisions of *The Change of Name Act, 1995* for a change of name(s).
fais, en vertu des dispositions de la *Loi de 1995 sur le changement de nom,* une demande de changement de nom(s).

My present marital status is:
Situation de famille actuelle: ☐ Never married / Célibataire ☐ Married / Marié(e) ☐ Divorced / Divorcé(e) ☐ Widowed / Veuf/Veuve

If applicant is, or was, married:
Si le demandeur est ou était marié:

Full Name of spouse
Nom complet du conjoint _____
Maiden Name Required if a Woman / Nom de jeune fille s'il s'agit d'une femme

Date of Marriage
Date du mariage _____

Place of Marriage
Lieu du mariage _____

Is spouse living?
Le conjoint est-il encore en vie? ☐ Yes / Oui ☐ No / Non

If no,
Si c'est non, _____
Date of Death / Date du décès Place of Death / Lieu du décès

My citizenship status / Statut de citoyenneté:

☐ I am a Canadian Citizen (Enclose Birth Certificate if born outside of Saskatchewan but in Canada, or certificate of citizenship — do not send photocopies)
Je déclare avoir la citoyenneté canadienne (Joindre le certificat de naissance si on l'est né à l'extérieur de la Saskatchewan mais au Canada, ou le certificat de citoyenneté — Ne pas envoyer de photocopies)

☐ I am a landed immigrant (Enclose Immigration documents — do not send photocopies)
Je suis immigrant(e) reçu(e) (Joindre les documents d'immigration — Ne pas envoyer de photocopies)

I REQUEST THIS (THESE) CHANGE OF NAME(S) FOR THE FOLLOWING REASON(S):
JE DEMANDE LE CHANGEMENT DE NOM POUR LA OU LES RAISON(S) SUIVANTE(S):

_____

_____

_____

2(a). TO BE COMPLETED IF APPLICANT IS APPLYING TO CHANGE OWN NAME:
À REMPLIR SI LE DEMANDEUR VEUT CHANGER SON PROPRE NOM:

From my present name
De mon nom actuel _____
Print Full Given Name(s) / Prénom(s) en toutes lettres en lettres moulées Print Surname / Nom de famille en lettres moulées

To proposed name
Au nom indiqué _____
Print Full Given Name(s) / Prénom(s) en toutes lettres en lettres moulées Print Surname / Nom de famille en lettres moulées

(b). TO BE COMPLETED IF APPLICANT IS MARRIED:
À REMPLIR SI LE DEMANDEUR EST MARIÉ:

ACKNOWLEDGMENT OF APPLICATION
RECONNAISSANCE DE DEMANDE

I, , spouse of
Je soussigné(e) _____ , conjoint(e) du demandeur,
Print Full Name / Nom en toutes lettres en lettres moulées

the applicant, have been made aware of the foregoing application for a change of name.
suis conscient(e) de la demande de changement de nom susdite.

_____ _____
Signature of Spouse / Signature du conjoint Signature of Witness / Signature du témoin

_____
Address / Adresse

HEALTH / SANTÉ 16-239/396

3. TO BE COMPLETED IF NAME OF SPOUSE IS TO BE CHANGED:
À REMPLIR SI LE NOM DU CONJOINT DOIT ÊTRE CHANGÉ:

From present name
Du nom actuel _____
Print Full Given Name(s) / Prénom(s) en toutes lettres en lettres moulées Print Surname / Nom de famille en lettres moulées

To proposed name
Au nom indiqué _____
Print Full Given Name(s) / Prénom(s) en toutes lettres en lettres moulées Print Surname / Nom de famille en lettres moulées

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

Name of Father
Nom du père _____

Maiden Name of Mother
Nom de jeune fille de la mère _____

I, , spouse of
Je soussigné(e) _____ , conjoint(e) du demandeur
Print Full Name / Nom en toutes lettres en lettres moulées

the applicant, consent to this application for a change of name.
consens à la demande de changement de nom susdite.

_____
Signature of Spouse / Signature du conjoint

_____
Signature of Witness / Signature du témoin

_____
Address / Adresse

4. TO BE COMPLETED FOR EACH UNMARRIED CHILD UNDER 18 YEARS OF AGE WHOSE NAME IS TO BE CHANGED, AND WHO IS IN THE LAWFUL CUSTODY OF THE APPLICANT. PRINT FULL GIVEN NAME(S) AND SURNAME OF CHILD.
À REMPLIR POUR CHAQUE ENFANT NON MARIÉ DE MOINS DE DIX-HUIT (18) ANS DONT LE NOM DOIT ÊTRE CHANGÉ ET QUI EST SOUS LA GARDE LÉGALE DU DEMANDEUR. ÉCRIRE LE(S) PRÉNOM(S) ET NOM DE L'ENFANT EN TOUTES LETTRES EN LETTRES MOULÉES.

From/De _____

To/À _____

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

From/De _____

To/À _____

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

From/De _____

To/À _____

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

From/De _____

To/À _____

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

From/De _____

To/À _____

Date of Birth
Date de naissance _____

Place of Birth
Lieu de naissance _____

5. CONSENT OF UNMARRIED MINOR(S) 14 YEARS OF AGE OR OVER:
CONSENTEMENT DU (DES) MINEUR(S) NON MARIÉ(S) DE 14 ANS ET PLUS:

I, HEREBY CONSENT TO THE FOREGOING APPLICATION FOR A CHANGE OF MY NAME, AND I AM THE FULL AGE OF 14 YEARS.
JE CONSENS PAR LA PRÉSENTE À LA DEMANDE DE CHANGEMENT DE NOM SUSDITE ET JE DÉCLARE QUE JE SUIS ÂGÉ(E) DE 14 ANS RÉVOLUS.

Signature of Child / Signature de l'enfant	Signature and Address of Witness / Signature et adresse du témoin
Signature of Child / Signature de l'enfant	Signature and Address of Witness / Signature et adresse du témoin
Signature of Child / Signature de l'enfant	Signature and Address of Witness / Signature et adresse du témoin

6. TO BE COMPLETED BY ANY OTHER PERSON SHARING LAWFUL CUSTODY OF THE CHILD/CHILDREN NAMED IN THIS APPLICATION:
À REMPLIR PAR TOUTE AUTRE PERSONNE PARTAGEANT LA GARDE LÉGALE DE L'ENFANT OU DES ENFANTS MENTIONNÉ(S) DANS CETTE DEMANDE:

I,
Je soussigné(e) _____
Print Full Name / Nom en toutes lettres en lettres moulées

share lawful custody of the child/children named in this application with the applicant, and I am in agreement with the proposed change of name of the child/children.
partage la garde légale de l'enfant ou des enfants mentionné(s) dans cette demande avec le demandeur et je consens au changement de nom indiqué de l'enfant (des enfants).

Signature of Other Lawful Custodian / Signature de l'autre gardien légal	Signature of Witness / Signature du témoin
Address / Adresse	Address / Adresse

AFFIDAVIT OF QUALIFICATION AND BONA FIDES
AFFIDAVIT DE QUALIFICATION ET DE BONNE FOI

CANADA, PROVINCE OF SASKATCHEWAN
CANADA, PROVINCE DE SASKATCHEWAN

I, of
Je soussigné(e) _____ de _____
Print Full Name / Nom en toutes lettres en lettres moulées — City/Town/Village / Ville/Village

IN THE PROVINCE OF SASKATCHEWAN, DECLARE THAT:
DANS LA PROVINCE DE LA SASKATCHEWAN, DÉCLARE QUE:

- I am ordinarily resident in Saskatchewan, and have been actually resident in Saskatchewan for at least three consecutive months in the twelve month period immediately preceding this application.
Je réside habituellement en Saskatchewan et que j'ai véritablement résidé en Saskatchewan pendant au moins trois mois consécutifs dans les douze mois précédant la présente demande.
- The statements made by me in the Application for Change of Name are true to the best of my knowledge, and the said Application is made by me bona fide and for no improper purpose.
Les renseignements que j'ai donnés dans la présente demande de changement de nom sont, à ma connaissance, exacts et que je présente cette demande en toute bonne foi et sans mauvaise intention.

Declared before me at
Déclaré devant moi à _____
City/Town/Village / Ville/Village

in the Province of Saskatchewan, this
dans la province de la Saskatchewan, ce _____

day of
jour de _____ ,19 _____

_____
Signature of Applicant / Signature du demandeur

_____
Signature of Notary Public, Justice of the Peace or Commissioner for Oaths in and for Saskatchewan
Signature du notaire, juge de paix ou commissaire à l'assermentation dans et pour la province de la Saskatchewan

My Appointment Expires
Mon mandat expire le _____

CONDITIONS AND INSTRUCTIONS FOR APPLICATION AS SET FORTH IN THE CHANGE OF NAME ACT, 1995

1. To be eligible to apply for a legal change of name in Saskatchewan, the applicant must be a person who:
   (a) is ordinarily resident in Saskatchewan;
   (b) has been actually resident in Saskatchewan for at least three consecutive months in the 12-month period immediately preceding the date of his or her application;
   (c) is legally entitled to remain in Canada; and
   (d) is at least 18 years old or is married, widowed or divorced.

2. BIRTH CERTIFICATES:
   The applicant must submit an official birth certificate issued from a Vital Statistics office for each person whose name is to be changed (not required if person was born in Saskatchewan). An official birth certificate which shows the parents' names is required for children born outside of Saskatchewan. When applying on behalf of children, a copy of the applicant's birth certificate is also required (not required if person was born in Saskatchewan). If the applicant or any person named in the application for whom a change of name is being requested was born outside of Canada, official certificates of Canadian Citizenship or official Immigration documents must be submitted.

3. MARRIAGE CERTIFICATE:
   If the applicant is married, an official marriage certificate issued from a Vital Statistics office must be submitted (not required if married in Saskatchewan).

4. DEATH CERTIFICATE:
   If the applicant is widowed, an official death certificate of the deceased spouse issued from a Vital Statistics office must be submitted (not required if spouse died in Saskatchewan; however, the applicant must provide the full name of the deceased spouse and the date and place of death).

5. PROOF OF DIVORCE:
   If the applicant is a divorced person, an official or certified photocopy of the Decree Absolute or Certificate of Divorce must be submitted.

6. PROOF OF CUSTODY:
   An official or certified photocopy of any Agreement, Judgment, Decree Nisi or other Court Order granted with respect to the lawful custody of any child (children) named in the application must be submitted.

7. NOTE: Documents requested in items numbered 2 to 6 above must be original documents, not photocopies. These documents will be returned to you.

8. PROOF OF RESIDENCY:
   A clear photocopy of the Saskatchewan Health Services Card of the applicant and of any other person named in the application for whom a change of name is being requested must be submitted.

9. CONSENT:
   Where the applicant is required to obtain consent, the application must include:
   (a) the consent of the spouse if his or her name will be affected by the application;
   (b) the consent of any unmarried children 14 years of age or over whose name will be affected by the application.

10. PUBLISHING THE CHANGE OF NAME(S):
    If a change of name application is accepted by the Director of Vital Statistics with respect to a person who is 15 years of age or older at the time of the application, the change of name must be published by the Director in The Saskatchewan Gazette. The Gazette is a public document and can be accessed on the government website. The publishing cost is paid by the applicant.

11. APPLICATION FEE:
    It is against postal regulations to send cash through the mail. Payment (application fee plus publishing fees) should be forwarded by Cheque or Money Order made payable to The Department of Health.

    Payment Must Accompany the Application.

12. ADDRESS FOR MAIL OR WALK-IN SERVICE
    Vital Statistics
    Saskatchewan Health
    1919 Rose Street
    Regina, Saskatchewan, S4P 3V7
    Telephone: 306-787-3092

CONDITIONS ET DIRECTIVES POUR UNE DEMANDE SELON LA LOI DE 1995 SUR LE CHANGEMENT DE NOM

1. Pour avoir le droit d'effectuer un changement de nom légal, la personne qui demande ce changement doit:
   (a) résider ordinairement en Saskatchewan;
   (b) avoir établi sa résidence en Saskatchewan pendant au moins trois mois consécutifs dans les douze mois qui précèdent la date de sa demande;
   (c) être légalement habilitée à rester au Canada;
   (d) être âgée d'au moins dix-huit ans ou être mariée, veuve ou divorcée.

2. CERTIFICATS DE NAISSANCE:
   La personne qui fait la demande doit soumettre un certificat de naissance officiel délivré par un bureau des services de l'état civil pour toutes les personnes dont le nom doit être changé, sauf si ces dernières sont nées en Saskatchewan. Un certificat de naissance officiel mentionnant le nom des parents est requis pour tout enfant né à l'extérieur de la Saskatchewan. De plus, la personne qui fait la demande au nom d'enfants doit aussi présenter une copie de son propre certificat de naissance, sauf si elle est née en Saskatchewan. Si la personne qui fait la demande, ou si toute personne mentionnée dans la demande pour qui on requiert un changement de nom, est née à l'extérieur du Canada, on doit soumettre les certificats officiels de citoyennet é canadienne ou les documents officiels des services de l'immigration .

3. CERTIFICAT DE MARIAGE:
   Si la personne qui fait la demande est mariée, elle doit soumettre un certificat de mariage officiel délivré par un bureau des services de l'état civil, sauf si elle est née en Saskatchewan.

4. CERTIFICAT DE DÉCÈS:
   Si la personne qui fait la demande est veuve, elle doit soumettre un certificat de décès officiel du défunt délivré par un bureau des services de l'état civil, sauf si le défunt est mort en Saskatchewan. La personne doit cependant fournir le nom du défunt ainsi que la date et le lieu du décès.

5. PREUVE DE DIVORCE:
   Si la personne qui fait la demande est divorcée, elle doit soumettre une photocopie officielle ou certifi ée conforme du jugement définitif ou du certificat de divorce.

6. PREUVE DE GARDE LÉGALE:
   La personne qui fait la demande doit soumettre une photocopie officielle ou certifi ée conforme de tout accord, jugement, jugement conditionnel ou de toute autre décision judiciaire qui a été accordée relativement à la garde légale de tout enfant nommé dans la demande.

7. REMARQUE: Les documents requis dans les points 2 à 6 doivent être des documents originaux et non des photocopies. Ces documents vous seront rendus.

8. PREUVE DE RÉSIDENCE:
   La personne qui fait la demande ainsi que toute autre personne nommée dans la demande pour qui on requiert un changement de nom doit soumettre une photocopie nette de sa carte des Services de santé de la Saskatchewan.

9. CONSENTEMENT:
   Lorsque la personne qui fait la demande doit obtenir un consentement, sa demande doit être accompagnée:
   (a) du consentement du conjoint, si la demande a un effet sur le nom du conjoint;
   (b) du consentement de tout enfant non marié de quatorze ans ou plus, si la demande a effet sur le nom de l'enfant.

10. PUBLICATION DU CHANGEMENT DE NOM(S):
    Lorsqu'une demande de changement de nom relative à une personne âgée de quinze ans ou plus au moment de la demande est acceptée par le directeur des services de l'état civil, ce dernier est tenu de faire publier le changement de nom dans la Gazette de la Saskatchewan. La Gazette est un document public et peut êtrê consultée sur le site Web du gouvernement. La publication du changement de nom est aux frais de la personne qui en a fait la demande.

11. DROITS DE DEMANDE
    Les règlements postaux interdisent l'envoi par la poste d'argent en espèces. Les paiements (demande et frais de publication, s'il y a lieu) doivent être faits par chèque ou mandat-poste libellé à l'ordre du Minist ère de la Sant é.
    Joindre le paiement à la demande.

12. ADRESSE - COURRIER OU SERVICE AU COMPTOIR:
    Services de l'état civil
    Ministère de la Santé de la Saskatchewan
    1919, rue Rose
    Regina (Saskatchewan) S4P 3V7
    Téléphone: 306-787-3092

26 Jly 96 cC-6.1 Reg 1; 22 Jne 2007 SR 49/2007 s5.

Form C.N. 2
[*Subsection 4(2)*]

Registration of Change of Name

C.N. 2

Registration No.
N° d'enregistrement _____

Government of Saskatchewan
Department of Health
Vital Statistics

Gouvernement de la Saskatchewan
Ministère de la Santé
Services de l'état civil

The Change of Name Act, 1995
Registration of Change of Name

La loi de 1995 sur le changement de nom
Enregistrement d'un changement de nom

The following changes of name are registered under the provisions of The Change of Name Act, 1995 of Saskatchewan.

Les changements de nom ci-après sont enregistrés en exécution de la Loi de 1995 sur le changement de nom de la Saskatchewan.

Former Name
Ancien nom _____

Address
Adresse _____

Date of Birth
Date de naissance _____

Name Changed To
_____

Nouveau nom
Former Name of Spouse _____
Ancien nom du conjoint ou de la conjointe

Date of Birth _____
Date de naissance

Name Changed To _____

Nouveau nom
Name(s) of Child or Children
Nom(s) de l'enfant ou des enfants

Former Name	Name Changed To	Date of Birth

GIVEN UNDER MY HAND at the City of Regina, in the Province of Saskatchewan,
FAIT SOUS MA SIGNATURE dans la ville de Regina, dans la province de la Saskatchewan,

this _____ day of
ce _____ jour du mois de/d' _____ , 19____ .

HEALTH / SANTÉ 16-40 / 396

DIRECTOR OF VITAL STATISTICS
DIRECTEUR/DIRECTRICE DES SERVICES DE L'ÉTAT CIVIL

Form C.N. 3
[*Subsection 4(3)*]

Certificate of Change of Name

C.N. 3

Registration No.
N° d'enregistrement _____

Government of Saskatchewan
Department of Health
Vital Statistics

Gouvernement de la Saskatchewan
Ministère de la Santé
Services de l'état civil

The Change of Name Act, 1995
Certificate of Change of Name

La loi de 1995 sur le changement de nom
Certificat de changement de nom

This is to Certify that on the _____ day of
La présente atteste qu'au _____ jour du mois de/d' _____ ,19____

the following change(s) of name was (were) registered under the provisions of The Change of Name Act, 1995
le(s) changement(s) de nom suivant(s) a (ont) été consigné(s) en exécution de la Loi de 1995 sur le changement

of Saskatchewan.
de nom de la Saskatchewan.

Former Name
Ancien nom _____

Address
Adresse _____

Date of Birth
Date de naissance _____

Name Changed To
Nouveau nom _____

Former Name of Spouse
Ancien nom du conjoint ou de la conjointe _____

Date of Birth
Date de naissance _____

Name Changed To
Nouveau nom _____

Name(s) of Child or Children
Nom(s) de l'enfant ou des enfants

Former Name Ancien nom	Name Changed To Nouveau nom	Date of Birth Date de naissance

GIVEN UNDER MY HAND at the City of Regina, in the Province of Saskatchewan,
FAIT SOUS MA SIGNATURE dans la ville de Regina, dans la province de la Saskatchewan,

this _____ day of
ce _____ jour du mois de/d' _____ , 19____.

DIRECTOR OF VITAL STATISTICS
DIRECTEUR/DIRECTRICE DES SERVICES DE L'ÉTAT CIVIL

HEALTH / SANTÉ 16-38 / 396

Form C.N. 4
[*Subsection 4(4)*]

Registration of Change of Name Effected outside the Province of Saskatchewan

C.N. 4

Registration No.
N° d'enregistrement _____

Government of Saskatchewan
Department of Health
Vital Statistics

Gouvernement de la Saskatchewan
Ministère de la Santé
Services de l'état civil

The Change of Name Act, 1995

Registration of Change of Name Effected Outside the Province of Saskatchewan

The following changes of name are registered under the provisions of The Change of Name Act , 1995 of Saskatchewan.

La loi de 1995 sur le changement de nom

Enregistrement d'un changement de nom effectué à l'extérieur de la province de la Saskatchewan

Les changements de nom ci-après sont enregistrés en exécution de la Loi de 1995 sur le changement de nom de la Saskatchewan.

Former Name
Ancien nom _____

Address
Adresse _____

Date of Birth
Date de naissance _____

Name Changed To
Nouveau nom _____

Former Name of Spouse
Ancien nom du conjoint ou de la conjointe _____

Date of Birth
Date de naissance _____

Name Changed To
Nouveau nom _____

Name(s) of Child or Children
Nom(s) de l'enfant ou des enfants

Former Name Ancien nom	Name Changed To Nouveau nom	Date of Birth Date de naissance

---

GIVEN UNDER MY HAND at the City of Regina, in the Province of Saskatchewan,
FAIT SOUS MA SIGNATURE dans la ville de Regina, dans la province de la Saskatchewan,

this _____ day of
ce _____ jour du mois de/d' _____ , 19___ .

HEALTH / SANTÉ 16-41 / 396

DIRECTOR OF VITAL STATISTICS
DIRECTEUR/DIRECTRICE DES SERVICES DE L'ÉTAT CIVIL

Form C.N. 5
[*Subsection 4(5)*]

Certificate of Registration of Change of Name Effected Outside the Province of Saskatchewan

C.N. 5

Registration No.
N° d'enregistrement _____

Government of Saskatchewan
Department of Health
Vital Statistics

Gouvernement de la Saskatchewan
Ministère de la Santé
Services de l'état civil

The Change of Name Act, 1995
Certificate of Registration of Change of Name Effected Outside the Province of Saskatchewan

La loi de 1995 sur le changement de nom
Certificat d'enregistrement d'un changement de nom effectué à l'extérieur de la province de la Saskatchewan

This is to Certify that on the _____ day of
La présente atteste qu'au _____ jour du mois de/d' _____, 19____

the following change(s) of name was (were) registered under the provisions of The Change of Name Act, 1995
le(s) changement(s) de nom suivant(s) a (ont) été consigné(s) en exécution de la Loi de 1995 sur le changement

of Saskatchewan.
de nom de la Saskatchewan.

Former Name
Ancien nom _____

Address
Adresse _____

Date of Birth
Date de naissance _____

Name Changed To
Nouveau nom _____

Former Name of Spouse
Ancien nom du conjoint ou de la conjointe _____

Date of Birth
Date de naissance _____

Name Changed To
Nouveau nom _____

Name(s) of Child or Children
Nom(s) de l'enfant ou des enfants

Former Name Ancien nom	Name Changed To Nouveau nom	Date of Birth Date de naissance

GIVEN UNDER MY HAND at the City of Regina, in the Province of Saskatchewan,
FAIT SOUS MA SIGNATURE dans la ville de Regina, dans la province de la Saskatchewan,

this _____ day of
ce _____ jour du mois de/d' _____ , 19____ .

DIRECTOR OF VITAL STATISTICS
DIRECTEUR/DIRECTRICE DES SERVICES DE L'ÉTAT CIVIL

HEALTH / SANTÉ 16-39 / 396

Form C.N. 6
[*Subsection 4(6)*]

Application for Duplicate Certificate

C.N. 6

Government of Saskatchewan
Department of Health
Vital Statistics

Gouvernement de la Saskatchewan
Ministère de la Santé
Services de l'état civil

The Change of Name Act, 1995
Application for Change of Name Certificate

La loi de 1995 sur le changement de nom
Demande préalable à la délivrance d'un certificat de changement de nom

To: Director of Vital Statistics, Regina, Saskatchewan
À : Directeur/directrice des services de l'état civil, Regina (Saskatchewan)

Date _____

I am applying for a search and the issue of
Je présente une demande préalable à l'enquête sur _____
(NUMBER REQUIRED/NOMBRE DÉSIRÉ)

change of name certificates.
attestation(s) de changement de nom et à la délivrance de ce(s) dernier(s).

Full Name Before Change Nom complet avant changement	Surname Nom de famille	_____
	Given names Prénoms	_____
Full Name After Change Nom complet après changement	Surname Nom de famille	_____
	Given names Prénoms	_____

Date of Change of Name:
Date de changement de nom : _____

I require the certificate(s) for the following reason:
Je désire obtenir l'attestation (les attestations) pour la raison suivante :

_____

_____

My relationship to the person named on the certificate is:
Mon lien de parenté avec la personne dont le nom figure sur l'attestation est : _____

I enclose the fee of $25.00 for each certificate requested.
Je joins à la présente un paiement de 25 $ pour chaque attestation demandée.

_____
(SIGNATURE OF APPLICANT / SIGNATURE DU DEMANDEUR)

Mailing Address of Applicant
Adresse postale du demandeur ou de la demandeuse

Telephone No.:
N° de téléphone : _____

_____
(NAME/NOM)

_____
(STREET ADDRESS OR P.O. BOX NO. / ADRESSE - N° ET RUE OU C.P.)

_____
(CITY / VILLE) (PROVINCE OR COUNTRY / PROVINCE OU PAYS)

_____
(POSTAL CODE / CODE POSTAL)

For Vital Statistics Use Only:
Réservé à l'usage du Bureau des services de l'état civil:

Registration No.:
N° d'enregistrement : _____

Date of Registration:
Date d'enregistrement : _____

Verified by:
Attesté(e) par : _____

Amount Received:
Somme reçue : _____

HEALTH / SANTÉ 16-38 / 396

FORM C.N. 7
[*Subsection 4(7)*]

Application for Alteration of Given Name(s) within Twelve Months from Day of Birth

FORMULAIRE C.N. 7
[*Paragraphe 4(7)*]

Demande de modification de prénom(s) dans les douze mois suivant la naissance

C.N. 7

Information Services Corporation OF SASKATCHEWAN

The Change of Name Act, 1995
Application for Alteration of Given Name(s) within Twelve Months from Day of Birth

Loi de 1995 sur le changement de nom
Demande de modification de prénom(s) dans les douze mois suivant la naissance

In the matter of the birth registered as / Dans l'affaire de la naissance enregistrée sous le nom : _____

(Given Name(s) and Surname of Child / Prénom(s) et nom de famille de l'enfant)

which took place on the _____ day of _____, _____ at _____

qui a eu lieu le _____ à _____

in the Province of Saskatchewan
dans la province de la Saskatchewan

I/We the below-listed parent(s)/guardians of the child request that the given name(s) recorded on the Statement of Live Birth form of this child be altered to:

Je/Nous soussigné(s), parent(s)/tuteur(s) de l'enfant, demande/demandons que les prénoms inscrits dans la déclaration de naissance vivante de l'enfant soient modifiés à :

_____

(Enter Given Name(s) Only – Do Not Enter Surname / Inscrivez seulement les prénoms, sans le nom de famille)

Parent/Guardian:
Parent/Tuteur:

_____
Name/Nom

_____
Address/Adresse

_____ _____ _____ _____
City/Ville Province Postal Code / Code postal Telephone/Téléphone

_____ _____
Signature Date

C-6.1 REG 1 CHANGE OF NAME

Parent/Guardian:
Parent/Tuteur:

Name/Nom

Address/Adresse

City/Ville | Province | Postal Code / Code postal | Telephone/Téléphone

Signature | Date

If the particulars of more than two (2) parents are recorded on the Statement of Live Birth, the remaining parents are to list themselves over-leaf.
Si la Déclaration de naissance vivante contient les données de plus de deux parents, ces autres parents doivent s'inscrire au verso du présent formulaire.

Parent/Guardian:
Parent/Tuteur:

Name/Nom

Address/Adresse

City/Ville | Province | Postal Code / Code postal | Telephone/Téléphone

Signature | Date

Parent/Guardian:
Parent/Tuteur:

Name/Nom

Address/Adresse

City/Ville | Province | Postal Code / Code postal | Telephone/Téléphone

Signature | Date

DO NOT WRITE BELOW THIS LINE — OFFICE USE ONLY /
NE RIEN ÉCRIRE CI-DESSOUS — À L'USAGE DU BUREAU

Notations/Remarques

Filed at Regina, Saskatchewan on _____ _____
Déposé à Regina, en Saskatchewan, le

Registrar of Vital Statistics /
Registraire des services de l'état civil

FORM C.N. 8
[*Subsection 4(8)*]

Statutory Declaration for Alterationof Name(s)

FORMULAIRE C.N. 8
[*Paragraphe 4(8)*]

Déclaration solennelle pourmodification de nom(s)

C.N. 8

The Change of Name Act, 1995
Statutory Declaration for Alteration of Name(s)

Loi de 1995 sur le changement de nom
Déclaration solennelle pour modification de nom(s)

In the matter of the birth registered as / Dans l'affaire de la naissance enregistrée sous le nom : _____

(Given Name(s) and Surname of Child / Prénom(s) et nom de famille de l'enfant)

which took place on the _____ day of _____, _____ at _____

qui a eu lieu le _____ à _____

in the Province of Saskatchewan
dans la province de la Saskatchewan

I,
Je soussigné(e),

_____

(Name of Declarant / Nom du déclarant ou de la déclarante)

of / de _____ in the Province of / dans la province de _____

(Full Mailing Address / Adresse postale complète)

do solemnly declare that:
déclare solennellement ce qui suit :

1. I am the person to whom this birth registration applies.
   Je suis la personne à qui l'enregistrement de naissance s'applique.
2. The names recorded on the certificate of birth that I previously received from Saskatchewan Vital Statistics are:
   Les noms inscrits sur le certificat de naissance que j'ai reçu précédemment des Services de l'état civil de la Saskatchewan sont:

_____

(Given Name(s) and Surname / Prénom(s) et nom de famille)

3. These names differ from the names recorded on my Statement of Live Birth.
   Ces noms diffèrent de ceux qui sont inscrits dans ma déclaration de naissance vivante.

4. I have consistently used the names recorded on the certificate of birth believing them to be correct.
   J'ai fait un usage constant des noms inscrits sur le certificat de naissance, les croyant exacts.

5. I now request that the names recorded on my Statement of Live Birth be amended to correspond to the names recorded on my certificate of birth.
   Je demande maintenant que les noms inscrits dans ma déclaration de naissance vivante soient modifiés pour correspondre aux noms inscrits sur mon certificat de naissance.

And, I make this solemn declaration conscientiously believing it to be true and knowing it to be of the same force and effect as if made under oath, and by virtue of the *Canada Evidence Act*.
Et je fais cette déclaration solennelle la croyant, en mon âme et conscience, véridique et sachant qu'elle a la même force et les mêmes effets que si elle avait été faite sous serment, et en vertu de la *Loi sur la preuve au Canada.*

Declared before me at
Déclaré devant moi à _____

in the Province of _____ _____
dans la province de Signature of Declarant /Signature du déclarant / de la déclarante

this day of
ce_____ _____ 20_____

Signature of Notary Public, Justice of the Peace or Commissioner for Oaths in and for Saskatchewan.
Signature du notaire, juge de paix ou commissaire à l'assermentation en et pour la Saskatchewan.

My appointment expires
_____ Mon mandat expire le _____

DO NOT WRITE BELOW THIS LINE — OFFICE USE ONLY /
NE RIEN ÉCRIRE CI-DESSOUS — À L'USAGE DU BUREAU

Notations/Remarques

Filed at Regina, Saskatchewan on _____ _____
Déposé à Regina, en Saskatchewan, le Registrar of Vital Statistics /
Registraire des services de l'état civil

8 Oct 2010 SR 103/2010 s9.

REGINA, SASKATCHEWAN
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