

**COURT OF COMMON PLEAS
SANDUSKY COUNTY, OHIO
PROBATE DIVISION**

IN THE MATTER OF THE BIRTH RECORD OF _____
(First, Middle, and Last Name)

CASE NO. _____

CONSENT OF PARENTS OR GUARDIANS

The undersigned, being the parents or Legal Guardians of a minor who is the subject of this application, do consent to the change of the sex marker on the birth record as proposed and waive notice of any hearing on the matter.

Parent/Guardian Signature

Parent/Guardian Signature

Typed or Printed Name

Typed or Printed Name

Sworn to and subscribed in my presence this _____ day of _____, 20____ .

Notary Public