

## NAME CHANGE Form

The name a CRTO Member uses in their practice should be the name registered with the CRTO. The public has a right to know who the Members are and their qualifications. In addition, the CRTO must be able to identify a Member if needed.

A name change request must be submitted in writing along with a photocopy of one of the following documents:

- □ Marriage Certificate
- Change of Name Certificate
- □ Certificate of Divorce

CRTO Reg. No. (if applicable)	
FIRST NAME(as currently on file)	
SURNAME (as currently on file)	
NEW FIRST NAME (if applicable)	
NEW SURNAME (if applicable)	
EMAIL	
PHONE NUMBER	
SIGNATURE	DATE
SUDMIT VOUD ADDUCATION (with the summaring desumentation) TO	

SUBMIT YOUR APPLICATION (with the supporting documentation) TO:

CRTO, 90 Adelaide Street W., Suite 300 Toronto, ON M5H 3V9

FAX: 416-591-7890 | EMAIL: registrationservices@crto.on.ca

QUESTIONS:

TEL: 416-591-7800 or toll free 1-800-261-0528, EMAIL: registrationservices@crto.on.ca web www.crto.on.ca

OFFICE U	SE ONLY	