

MARRT Name Change Form

The name a MARRT registrant uses in their practice should be the same name registered with the MARRT. The public has a right to know who the Registrants are and their qualifications. In addition, the MARRT must be able to identify a Registrant correctly.

1. PERSONAL / (CONTACT	INFO	RMAT	TION			
MARRT Reg. No. (if applicable	э)						
FIRST NAME(as currently on	file)						
SURNAME (as currently on fi	e)						
NEW FIRST NAME (if applic	able)						
NEW SURNAME (if applicab	le)						
EMAIL							
PHONE NUMBER							
2. DOCUMENT RI If your name change documents:		chang	ge req	uest must be submitte	d in writing along with	a photocopy o	of one of the following
☐ Change	of Name (Certifi	cate				
☐ Marriage	Certificat	ie					
Divorce (Certificate	;					
3. SIGNATURE /	DATE						
SIGNATURE					DATE		
	ssociation	of Re	giste	IE REQUIRED DOCUM red Respiratory Thera jistrar@marrt.org		marrt.org	