



MARRIAGE LICENCE APPLICATION

Marriage Act - Form 3

Marriage Licence No.

APPLICANT					JOINT APPLICANT				
					<b>LAST NAME</b>				
					<b>FIRST AND MIDDLE NAMES</b>				
<input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED					<b>MARITAL STATUS</b>				
COURT FILE NUMBER					COURT FILE NUMBER				
CITY DIVORCE GRANTED IN					CITY DIVORCE GRANTED IN				
					<b>RELIGIOUS DENOMINATION</b>				
AGE	DATE OF BIRTH	DAY	MONTH	YEAR	<b>AGE AND DATE OF BIRTH</b>				
PROVINCE (IF OUTSIDE CANADA, COUNTRY)					PROVINCE (IF OUTSIDE CANADA, COUNTRY)				
LAST NAME					LAST NAME				
FIRST (NAMES)					<b>FATHER'S NAME</b> (Last, First)				
LAST NAME					LAST NAME				
FIRST (NAMES)					<b>MOTHER'S MAIDEN NAME</b> (Last name before marriage, First)				
PROVINCE (IF OUTSIDE CANADA, COUNTRY)					PROVINCE (IF OUTSIDE CANADA, COUNTRY)				
PROVINCE (IF OUTSIDE CANADA, COUNTRY)					<b>FATHER'S PLACE OF BIRTH</b>				
PROVINCE (IF OUTSIDE CANADA, COUNTRY)					<b>MOTHER'S PLACE OF BIRTH</b>				
STREET NAME AND NUMBER APT					STREET NAME AND NUMBER APT				
CITY OR TOWN PROVINCE					CITY OR TOWN PROVINCE				
POSTAL CODE TELEPHONE NUMBER					POSTAL CODE TELEPHONE NUMBER				
STREET NAME AND NUMBER APT					STREET NAME AND NUMBER APT				
CITY OR TOWN PROVINCE					CITY OR TOWN PROVINCE				
POSTAL CODE TELEPHONE NUMBER					POSTAL CODE TELEPHONE NUMBER				
INTENDED PLACE OF MARRIAGE		CITY, TOWN, VILLAGE			COUNTY OR DISTRICT			INTENDED DATE OF MARRIAGE	
I DECLARE THAT THE ABOVE INFORMATION IS CORRECT: SIGNATURE OF APPLICANT					I DECLARE THAT THE ABOVE INFORMATION IS CORRECT: SIGNATURE OF JOINT APPLICANT				
DATE					DATE				