**MARRIAGE CERTIFICATE REQUEST FORM**

Please complete this form in **BLOCK CAPITALS** and print; handwritten forms will **not** be accepted.

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| PARTICULARS | BRIDEGROOM | BRIDE |
| 1. SURNAME |  |  |
| 1. MAIDEN NAME |  |  |
| 1. OTHER NAMES |  |  |
| 1. DATE OF BIRTH (dd/mm/yyyy) |  |  |
| 1. PLACE OF BIRTH |  |  |
| 1. OCCUPATION |  |  |
| 1. MOTHER’S NAME   (MAIDEN NAME MUST BE INCLUDED) |  |  |
| 1. FATHER’S NAME |  |  |
| 1. REGISTRATION NUMBER (IF KNOWN) |  | |
| 1. DATE OF MARRIAGE |  | |
| 1. PLACE OF MARRIAGE |  | |
| 1. APPLICANT’S NAME |  | |
| 1. FULL ADDRESS |  | |
| 1. EMAIL |  | |
| 1. PHONE |  | |
| 1. CERTIFICATE WITH APOSTILLE | 🞎 | |
| Date:  Signature of Applicant: | | |