

# Please provide Mother's Maiden Name

Marriage Licence No.



**ServiceOntario**

Office of the Registrar General

## Marriage Licence Application Marriage Act - Form 3

Applicant		Joint Applicant	
		Current last name or single name	
		First and middle names	
<input type="checkbox"/> Never married <input type="checkbox"/> widowed <input type="checkbox"/> divorced		Marital status	<input type="checkbox"/> Never married <input type="checkbox"/> widowed <input type="checkbox"/> divorced
Country of divorce		If divorced	Country of divorce
City of divorce if in Canada			City of divorce if in Canada
Court file number			Court file number
		Religious denomination	
Age	Date of birth (yyyy/mm/dd)	Age and date of birth	Age      Date of birth (yyyy/mm/dd)
Province (if outside Canada, state the country)		Place of birth	Province (if outside Canada, state the country)
Last name or single name		Parent's name and place of birth	Last name or single name
First and middle names			First and middle names
Province (if outside Canada, state country)			Province (if outside Canada, state country)
Last name or single name		Parent's name and place of birth	Last name or single name
First and middle names			First and middle names
Province (if outside Canada, state country)			Province (if outside Canada, state country)
Last name or single name		Parent's name and place of birth	Last name or single name
First and middle names			First and middle names
Province (if outside Canada, state country)			Province (if outside Canada, state country)
Last name or single name		Parent's name and place of birth	Last name or single name
First and middle names			First and middle names
Province (if outside Canada, state country)			Province (if outside Canada, state country)
Last name or single name		Parent's name and place of birth	Last name or single name
First and middle names			First and middle names
Province (if outside Canada, state country)			Province (if outside Canada, state country)
Street name and number		Present address or postal address of applicants	Street name and number
Apt	Province/Country		Apt
City or town	Telephone Number		Province/Country
Postal code			Telephone Number
Street name and number		Permanent address of applicants if different from above	Street name and number
Apt	Province/Country		Apt
City or town	Telephone Number		Province/Country
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 (yyyy/mm/dd)		Date (yyyy/mm/dd)	

Personal Information contained on this form is collected under the authority of the *Marriage Act*, R.S.O. 1990, c. M. 3 and will be used to determine whether to issue the marriage licence, to register and record the marriage, provide certified copies, extracts, certificates, search notices, photocopies and for statistical, research, medical, law enforcement, adoption and adoption disclosure purposes. It is an offence to knowingly make a false statement on this form. Questions about this collection should be directed to: the Deputy Registrar General, Office of the Registrar General, 189 Red River Road, PO Box 4600, Thunder Bay ON P7B 6L8. Telephone: 1-800-461-2156 (outside Toronto but within North America) or 416-325-8305 (in Toronto or outside North America), 416-325-3408 (TTY/Teletypewriter).