

Office of the **Registrar General** **Marriage Licence Application** Marriage Act - Form 3

Applicant					Joint Applicant	
		Current last name or single name				
			d middle nes			
Never married widowed divorced		Marita	status	Never married widowed divorced		
Country of divorce				Country of divorce		
City of divorce if in Canada		If dive	orced	City of divorce if in Canada		
Court file number		_		Court file number		
		Reliq	gious iination			
Age Date o	f birth (yyyy/mm/dd)		d date of rth	Age	Date of bi	rth (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				Last name or single name		
First and middle names			s name e of birth	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	Apt			Street name and number Apt		Apt
City or town	Province/Country	Present address or postal address of applicants		City or town Province/Country		Province/Country
Postal code Telephone Number				Postal code Telephone Number		
Street name and number	Apt	Permanent		Street name and number A		Apt
City or town Province/Country		applic	ess of ants if nt from	City or town		Province/Country
Postal code	Telephone Number	above		Postal code		Telephone Number
Intended place of marriage City, town, village		;	County of	or district Intended date of marriage		
I declare that the above information is correct. Signature of Applicant				re that the above information is correct. Ire 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).

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