Mar	riage	Licence	No.



Ontario ServiceOntario

Office of the Registrar General

Marriage Licence Application Marriage Act - Form 3

	1								
Applicant					Joint Applicant				
			ast name le name						
			First and	d middle mes					
Never married widowe	ed divor	ced	Marita	l status	Never marri	ied widc	wed \square	divorced	
Country of divorce					Country of divorce				
City of divorce if in Canada			If div	orced	City of divorce if in Canada				
Court file number					Court file number				
				gious nination					
Age Date of birth (yyyy/mm/dd)			Age and	d date of	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					Last name or single name				
First and middle names			Parent' and plac	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					Last name or single name				
First and middle names			Parent's name and place 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)				
Street name and number	Apt	t			Street name and number			Apt	
City or town	ity or town Province/Country		Present address or postal address of applicants		City or town		Province/Country		
Postal code	Postal code Telephone Number				Postal code			Telephone Number	
Street name and number Apt		t	Permanent		Street name and number		Apt		
City or town		ovince/Country	address of applicants if different from		City or town		Province/Country		
Postal code	Tel	ephone Number	above		Postal code			Telephone Number	
Intended place of marriage City, town, village		County o		or district Intended date of marriage					
I declare that the above information is correct. Signature of Applicant				The second secon	eclare that the above information is correct. gnature of Joint Applicant				
Date (yyyy/mm/dd)				Date (yy	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).