

R208--8

INTENTION NO: \_\_\_\_\_

CERTIFICATE EXPIRATION DATE: \_\_\_\_\_

## MARRIAGE WORKSHEET

NAME PARTY A: \_\_\_\_\_

☐

FEMALE

☐

MALE

NAME PARTY B: \_\_\_\_\_

☐

FEMALE

☐

MALE

PLANNED DATE OF MARRIAGE: \_\_\_\_\_

PLANNED PLACE OF MARRIAGE: \_\_\_\_\_

Facility Name

Address- Street and Number

City

Zip Code

CURRENT TELEPHONE NUMBER ( ) -

IF YOU NEED TO BE CONTACTED AFTER MARRIAGE, WHAT IS YOUR PLANNED ADDRESS AFTER THE MARRIAGE:

Street and Number

City

State

Zip Code

TELEPHONE AFTER MARRIAGE: ( ) -

NAME OF OFFICIANT: \_\_\_\_\_

ADDRESS OF OFFICIANT: \_\_\_\_\_

Address- Street and Number

City

State

Zip Code

If the officiant is from another state, he or she must apply for and receive a commission from the Secretary of State before the marriage takes place. The Commission may be obtained from:

Secretary of State, Commissions  
Division  
McCormick Building- 17<sup>th</sup> floor  
1 Ashburton Place  
Boston, MA 02108  
(617) 727-2836

AGE ORDER  
COURT WAIVER  
COMMISSION

RECEIVED

YES

☐  
☐  
☐

NO

☐  
☐  
☐

NOT APPLICABLE

☐  
☐  
☐