**ADDITIONAL INFORMATION REQUIRED**

|  |  |
| --- | --- |
| Party 1 - Full Name |  |
| Other Party to Marriage/CP |  |
| Date and Place of Marriage/CP |  |
| Daytime Telephone Numbers |  |
| Mobile Numbers |  |
| E-mail Addresses |  |
|  |  |
| CIVIL MARRIAGE/CIVIL PARTNERSHIP |
| Time |  |
| Place of Marriage |  |
| Number of guests to be present at the ceremony |  |
|  |  |
| (For same sex Marriage please check that your Celebrant is authorised)RELIGIOUS MARRIAGE (includes Humanist celebrants) |
| Celebrant’s Full Name (**including middle names**) |  |
| Celebrant’s Designation, Name and location of Church to which attached (e.g. Minister at .…Parish Church, Town, Priest of ….Roman Catholic Church, Town, Formerly Minister of … Free Church, Town)  |  |
| Celebrant’s Telephone Number |  |
| Celebrant’s E-mail Address |  |
|  |  |
| WITNESSES TO YOUR MARRIAGE/CIVIL PARTNERSHIP |
| e.g. Bestman and bridesmaid, however anyone over the age of 16 on the date of the ceremony may be a witness and will be required to sign the marriage schedule on the day of the ceremony |
|  | First Witness | Second Witness |
| Full Name (**incl. middle names**) |  |  |
| Address |  |  |
| Postcode |  |  |