

Banns of Marriage Application

This form may be completed by one of the partners on behalf of both. All sections must be completed. The notes that accompany this form are important and should be read before each section is completed.

| | Man | Woman |
|--|-----------------------|---|
| Full Name Block Capitals | | |
| Age at proposed date of wedding | | |
| Address at time of publishing banns | | |
| Telephone Numbers | | |
| Email addresses | | |
| Date of birth | | |
| Since when have you lived at the address as above? | | |
| Rank profession or occupation | | |
| Which is your parish church? | | |
| At what church do you wish to be married? | | |
| On what date do you wish to be married? | | |
| I hereby certify that to the best of my belief the answers to the above questions are correct | Signature | Signature |
| Today's Date | Future Address | Dates for publication of banns 1. 2. 3. |