



Office of the **Registrar General**

Request for Marriage Certificate

(For marriages which took place in Ontario only)

If you have any questions, please contact the

Office of the Registrar General

189 Red River Road

PO Box 4600

Thunder Bay ON P7B 6L8

Telephone: 1-800-461-2156 (outside of Toronto)

416-325-8305 (in Toronto)

416-325-3408 (TTY/Teletypewriter)

Fax: 807-343-7459

Please PRINT clearly in blue or black ink.

(THIS SPACE RESERVED FOR OFFICE USE ONLY)	

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In the context of this form, the word "Applicant" refers to the person completing this Request.

-	Name				
First Name		Last Name			
Mailing A	ddress				
Organization	n / Firm (if applicable)				
Street No.	Street Name		Apt. No.	Buzzer No.	PO Box
City		Province			
Country		Postal Code	Telep	hone Number (includin	ng area code) Ext.
1. What ir	nformation are you requesting and how n	nuch will it co	st?		
Morrio					
	ge Certificate (File Size) NOTE: Section 4a must lontains basic information, such as names, date and place	•			
	-	•		Quantity .	5
This co	ontains basic information, such as names, date and place	e of marriage. OTE: Section 4b I		Quantity —	S
This co Certific This co	sontains basic information, such as names, date and place \$15.00 each ed Copy of Statement of Marriage (Long form) NO ontains all information registered on the statement of mar \$22.00 each	e of marriage. OTE: Section 4b I		npleted	5
Certific This co Search A searc (see Insinforma search	sontains basic information, such as names, date and place \$15.00 each ed Copy of Statement of Marriage (Long form) NO ontains all information registered on the statement of mar \$22.00 each	e of marriage. PTE: Section 4b I riage including sig istration exists or t riage event, choos t in the space prov	natures. hat there is note a year base ided for the di	Quantity Qua	

The Office of the Registrar General holds records for marriages that happened in Ontario during the past 80 years.

To obtain older records, contact:

Archives of Ontario 134 Ian Macdonald Boulevard Toronto ON M7A 2C5 1-800-668-9933 416-327-1600

2. Details of Brides/Grooms						
Name of Bride/Groom	e of Bride/Groom Last name before m		First Name	Middle Name		
Any other last name used	Place of Birth (Province/Country)					
Name of Bride/Groom	ame of Bride/Groom Last name before m		First Name	Middle Name		
Any other last name used		Place of Birth (Pro	vince/Country)			
3. Details of Event		+				
Date of Marriage Year Month Day	unknown, range of year	rs to search Place	of Marriage (City, Town or Villa	age)		
Is either bride/groom deceased?	□yes □no					
4. Details of the Applicant (Please 4a. Applicants for a Marriage Certifi		ategory of entitle	ed individuals the applic	ant belongs)		
I am: parent of eit	her bride/groom	child of the marriag	е			
Only the individuals above are entitled to a If either or both bride(s)/groom(s) are dece (see Instruction #1) are entitled to apply fo My relationship is:	eased, the following ad	Iditional Next of Kin	following certification:	f Kin, please complete the		
sibling of either bride/groom			I, (nar			
If either bride(s)/groom(s) is deceased the Extended Next of Kin (see Instruct applicant's relationship to either			of I certify that I am the Next of Kin, or the Next of Kin are deceased, and I am the Extended Next of Kin.			
bride/groom						
Authorized Representative of any entit this application (see Instruction #3)	led individual (see Instr	ruction #2). Proof of a	uthorization is required and i	must be attached to		
4b. Applicants for a Certified Staten	nent of Marriage (L	ong Form):				
I am: bride/groom. Only bride(s)/groo	om(s) are entitled to ap	pply				
If either or both bride(s)/groom(s) are dec to apply (see Instruction #1). My relationship		are entitled		licant is the Next of Kin Kin, please complete the		
parent of either bride/groom mariage			following certification:	(name,		
child of the marriage			please print), am the			
sibling of either bride/groom			of Next of Kin, or all the Ne			
either or both the bride(s)/groom(s) is are also deceased, the Extended Next apply. Please indicate the applicant's r	t of Kin (see Instruction #	#1) may	and I am the Extended I			
Authorized Representative of any entit	led individual (see Instr	ruction #2). Proof of a	uthorization is required and r	must be attached to this		

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5. Why are You Requesting t	this Information?	? (Select One)					
pension benefits estate settlement	insurance immigration	divorce other (specify)				_	
	oout myself and the	the requested document/information person(s) named on the record (if other	er than myse	elf) from s	such othe	er sources	as may
		s an offence to wilfully make a false s			e or such	ınıormatio	n to tne
Ministry of Government Services.		s an offence to wilfully make a false s	tatement on t	this form.		informatio	n to tne
Ministry of Government Services.			tatement on t	this form.		Month	n to tne
Ministry of Government Services.		s an offence to wilfully make a false s	g area code)	this form.	Signed		
Ministry of Government Services.		s an offence to wilfully make a false s	g area code)	this form.	Signed		
Ministry of Government Services. Signature of Applicant		s an offence to wilfully make a false s	g area code)	this form.	Signed		

For the purposes of entitlement to a Marriage Certificate (File Size), Next of Kin to the Bride/Groom include: Parents of either the Bride/Groom and Children of the marriage. If either (or both) of the Bride/Groom is deceased, Sibling(s) are entitled. Extended Next of Kin (closest surviving relative) to the Bride/Groom include: Grandmother, Grandfather, Aunt, Uncle, First Cousin, Niece, Nephew, or Grandchild.

For the purpose of entitlement to a Certified Copy of Statement of Marriage (Long Form), Next of Kin to the Bride/Groom include: Parents of either the Bride/Groom, Children of the marriage, Sibling(s) of the Bride/Groom. Extended Next of Kin (closest surviving relative) to the Bride/Groom include: Grandmother, Grandfather, Aunt, Uncle, First Cousin, Niece, Nephew, or Grandchild.

Instruction #2

Authorized Representative includes an estate trustee, an executor or administrator, a person with power of attorney or a person with legal guardianship acting on behalf of the deceased or an entitled individual.

Instruction #3

Proof of Authorization includes a certificate of appointment of estate trustee, letters of administration, an order under the *Declarations of Death Act*, 2002, a will, proof of power of attorney and proof of legal guardianship.

Instruction #4

A search may be requested by an individual getting married in another jurisdiction to demonstrate that he/she has not been married in Ontario (sometimes referred to as a letter of non-impediment).

Mail the Completed Request to: The Office of the Registrar General 189 Red River Road PO Box 4600 Thunder Bay ON P7B 6L8 Fax: 807-343-7459

If you require faster service than 6-8 weeks, please apply online at www.ServiceOntario.ca

Personal information contained on this form is collected under the authority of the *Vital Statistics Act*, R.S.O. 1990, c.V.4 and will be used to provide certified copies, extracts, certificates, or search notices and to verify the information provided and your entitlement to the service requested and for security and law enforcement purposes. It is an offence to wilfully 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 outside Toronto 1-800-461-2156 or in Toronto 416-325-8305, TTY/Teletypewriter (for the hearing impaired) 416-325-3408 or Fax: 807-343-7459.

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Applicant's Information					
Applicant's First Name		Applicant's Last Name			
Persons Named on the Marr	iage Certificate				
Name of Bride/Groom	Last name before marriage	Fir	st Name	Middle Name	
Name of Bride/Groom	Last name before marriage	Fir	st Name	Middle Name	
	from anywhere other than Canada, yhouse, or by VISA, MasterCard.	you must pay with	n an international r	money order in Canadian funds	
We will not accept post-dated of Institution.	cheques. An administration fee of \$3	5.00 will be applie	ed to any cheques	returned by a Financial	
• We DO NOT accept cash as p	ayment for any type of application.				
	ect to change without notice. You may nance, or by VISA, MasterCard.	send your reque	st by mail, and pa	y by cheque or money order,	
Your Payment Options					
Cheque or Money Order. Pl	ease make payable to: "Minister of Fi	nance".			
	e complete Credit Card Information be if you are faxing your request to us. 7459.	elow. ▼			
Credit Card Information					
Print Name of Cardholder (as it appears on the credit card)		Name of Credit Card Company VISA MasterCard			
Signature of Cardholder				Date	
V				Year Month Day	

Expiration Date

Credit Card Number (print clearly)

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