



REGISTRAR GENERAL'S DEPARTMENT  
PARLIAMENT & SHIRLEY STREET  
P. O. BOX N-532  
NASSAU, BAHAMAS

TELEPHONE: (242) 322-3316 OR 322-8038  
FAX: (242) 322-5553

APPLICATION FOR MARRIAGE CERTIFICATE

NAME OF HUSBAND \_\_\_\_\_

MAIDEN NAME OF WIFE \_\_\_\_\_  
(FIRST & LAST NAME)

DATE OF WEDDING \_\_\_\_\_

PLACE OF WEDDING \_\_\_\_\_

ON THE ISLAND OF \_\_\_\_\_

MARRIAGE OFFICER \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_

NUMBER OF COPIES \_\_\_\_\_

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PERIOD SEARCHED \_\_\_\_\_

(A) NO RECORD FOR MARRIAGE CAN BE FOUND ON FILE.