

**Parroise St. Jean Baptiste Parish**  
10020-100 Ave. Morinville, AB T8R 1P7  
Tél: (780) 939-4412 Fax: (780) 939-2016  
Email: office@sjbp.ca

DATE: \_\_\_\_\_

**APPLICATION FOR A MARRIAGE CERTIFICATE**

Name of Groom: \_\_\_\_\_ Name of Bride: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_

Reason for Certificate: \_\_\_\_\_

Requested By: \_\_\_\_\_ Relation: \_\_\_\_\_

Mail To: \_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- Issued \_\_\_\_\_
- Referred \_\_\_\_\_
- Not Found \_\_\_\_\_

\_\_\_\_\_  
Signature

**APPLICATION MADE ON BEHALF OF A LIVING THIRD PARTY**

Current Name of Bride or Groom: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Has *permission* been given for a marriage certificate to be released to the applicant? Yes  No

**SEARCH FEE: \$10.00 PER APPLICATION**

\_\_\_\_\_  
Signature of Third Party

**APPLICATION MADE ON BEHALF OF A DECEASED THIRD PARTY**

Name of Late Groom or Bride: \_\_\_\_\_

Has a *death certificate* been provided? Yes  No

\_\_\_\_\_  
Signature

Note: Should *permission* or *death certificate* fail to be provided, the application can be denied.  
If certificate is made for a future marriage, it should be mailed directly to the Parish.

Note: We cannot guarantee a certificate but will do a complete search of our records based on the information provided.