

Intention No.:

Certificate Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**MARRIAGE WORKSHEET for BERNARDSTON, MA**

Name Party A: \_\_\_\_\_

Female  Male

Name Party B: \_\_\_\_\_

Female  Male

Planned date of Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_

Planned Place of Marriage: \_\_\_\_\_

Facility Name

Address – Street number

City

Zip Code

Contact Party A/B Current Telephone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

If you need to be contacted after the marriage, what is your anticipated address after marriage:

Street & Number

city

State

Zip Code

Telephone after marriage: \_\_\_\_\_ E-Mail after marriage: \_\_\_\_\_

Name of Officiant: \_\_\_\_\_

Address of Officiant \_\_\_\_\_

Phone Number of Officiant: \_\_\_\_\_

E-mail of Officiant: \_\_\_\_\_

If the officiant is from another state, he or she must apply for and receive a commission from the Secretary of state before the marriage takes place. The Commission may be obtained from:

Secretary of state, Commissions Division  
McCormack Building – 17<sup>th</sup> Floor  
1 Ashburton Place  
Boston, MA 02108  
(627 727-2836)

Received

Yes

No

Not Applicable

Age Order

Court Waiver

Commission