ST. J@HN'S

## **Request for Marriage Services**

Spouse #1 Information			SECTION 1
Full Name			
	e of BirthPlace of Birth		
Address			
Address after wedding	(If different)		
Phone (work)		(cell)	
Email		Religion	
	City/Town	Province	Country
Father's full name at bi	irth		
Father's birthplace			
	City/Town	Province	Country
Spouse #2 Information			SECTION 2
Full Name			
	Full NamePlace of Birth		
Address		·	
		(cell)	
		Religion	
Mother's full name at b			
Mother's birthplace			
·	City/Town	Province	Country _
Father's full name at bi	irth		
Father's birthplace			
	City/Town	Province	Country

ST. J@HN'S

Office of the City Clerk

OCC - Reque	est for Marriage Servic	es by the Mayor	Office of	the City Clerk		
	oout the Event			<b>SECTION 3</b>		
Preferred date	e requested for Marriage	9	Time requested			
Second date choice requested for Marriage			Time requested			
received from	•	.m. and 3:00 p.m. and not oner date may be noted abovervices.)				
Location Option	ons:					
City Hall:	Mayor's Lounge	Council Chambers	Courtyard			
Other location address (additional \$100 fee will apply)						
Full Name of \	Witness #1			_		
Address of Wi	itness #1					
Full Name of \	Witness #2			_		
Address of Wi	itness #2			_		
Any additional	l information			SECTION 4		
Please provide	e any additional informa	ition about the event:				
Indemnificatio	n and Code of Conduct			SECTION 5		
representative	es, officers, employees a	ess and indemnify the City of and agents from and agains r proceedings that may be b	t any and all claims, d	emands,		

Applicants shall agree to save harmless and indemnify the City of St. John's and its elected representatives, officers, employees and agents from and against any and all claims, demands, suits, actions, causes of action and/or proceedings that may be brought against or made upon the City and/or its elected representatives, officers, employees or agents by any person arising out of matters in any way related to any act, failure to act or otherwise of the applicant and/or its employees, officers, servants, volunteers and agents in respect of, or pertaining to the marriage ceremony or the City's administration of the ceremony requirements.



OCC – Request for Marriage Services by the Mayor	Office of the City Clerk				
Indemnification and Code of Conduct continued	SECTION 5				
Applicants shall release, waive, and forever discharge the City and its elected representatives, officers, employees and agents from all liability to itself and it heirs, executors, administrators and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or damage to property for which the City may be responsible in respect of the conduct of the marriage ceremony.					
Applicants shall agree to abide by the following Code of Conduct:					
<ul> <li>Applicants and their guests shall refrain from smoking (including tobacco, marijuana, vapes) or drinking alcohol while on City premises.</li> </ul>					
<ul> <li>Applicants and their guests shall refrain from behavior with potential to harm oneself, others, or property.</li> </ul>					
Privacy Notice	SECTION 6				
Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and the Marriage Act and is needed to process your request for wedding services from the Mayor. The information collected will be used to aid the Mayor's Office in filling out the required forms from Vital Statistics on your behalf and will not be shared or used for any other purpose. The form and all if its information contained therein will be destroyed once the required wedding documents are complete. Further questions about the collection and use of the information may be directed to the Mayor's Office, by telephone: 709-576-8207 or email: <a href="mayor@stjohns.ca">mayor@stjohns.ca</a> .					
Signatures	SECTION 7				
Spouses shall sign below to indicate their acceptance of the above conditions.					
Spouse #1 Date					
Spouse #2 Date					

## Please send completed form to:

By Mail Office of the City Clerk P.O. Box 908, 10 New Gower Street St. John's, NL A1C 5M2

Email: mayor@stjohns.ca

## Or hand deliver to:

City of St. John's Office of the City Clerk Fourth Floor, City Hall

Office Hours: 9:00 a.m. - 4:30 p.m.

Tel: (709) 576-8207



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