



Appointment Date	
Appointment Time	

To whom it may concern

Name of Groom	Name of Bride

To ensure we record the correct information relating to your church when the above named couple attend this office to give their notice of marriage, please complete this form and return it to the couple so that they may bring it with them to their notice of marriage appointment.

Full name of Church	
Full name of Parish	
Date of Ceremony	

I can confirm that the couple named above have requested to be married at the above named Church under the following entitlement:

	Please tick those which apply
The church is in the ecclesiastical parish or district in which one or both parties have lived for at least the last 7 clear days	
One or both parties to the marriage is / are on the parish's electoral role	
One of both parties to the marriage has / have a Qualifying Connection to the church, as defined in section 1 of the Church of England Marriage Measure 2008	

I / we have agreed to conduct this marriage in accordance with the marriage rites of the Church of England and the marriage could have taken place by banns or common licence if the couple were not excluded by the Immigration Act 2014.

Signed

Position at Church.....

Daytime telephone number or email.....

Thank you for your assistance in this matter.

Southampton Registration Service.