

**Christian Ministers Association
Application for Marriage License Number**

Applicants Details

Full Given Name: _____ Date: _____

Address: _____

Postal Code _____

Province: _____ Phone Number: () _____

Ministry/Church _____

License Applied For: (Permanent) (Temporary)

Members status: (office use only)

Temporary License Marriage Details

Location of Ceremony: (Legal address)

Date : _____

Groom Information: _____

Bride's Information: _____

Notes: _____

Additional Details