

10011 - 170 ST NW  
EDMONTON, ALBERTA  
T5P 4R5 780-483-8211  
FAX: 780-483-0928

WWW.YOURWESTEND.COM

230, 6655 - 178 ST NW  
EDMONTON, ALBERTA  
T5T 4J5 780-483-4545  
FAX: 780-487-2807

## Congratulations on your upcoming marriage!

For your convenience, we have prepared this document to assist you in the process. You are required to obtain a marriage licence through our office within 90 days of the marriage.

### Requirements:

- The marriage must occur in the Province of Alberta within the 90-day timeframe.
- Both parties are required to apply in person.
- Both parties are required to present acceptable identification (Passport; Birth Certificate; Driver's Licence, etc...).
- If previously divorced, we require a copy of the final divorce certificate.
  - Clear and legible copies (fax or photocopy) are acceptable.
  - For additional information on locating your divorce certificate, please contact the City in which your divorce occurred.
    - For Edmonton, please contact (780) 422-2425.
    - If you are unsure what jurisdiction to contact, please refer to Central Divorce Registry at (613) 957-4519.
- There are no residency or citizenship requirements. Blood tests or medical certificates are not required in the Province of Alberta.
- *No appointment is necessary to apply, but the process can take approximately 15-30 minutes. We highly suggest submitting the attached Application and Marriage Licence Request Form to our office, via email or fax, and we will have the documents prepared and ready for your visit. This will greatly reduce any waiting or processing time.*
- If submitting to our office, via fax or email, please attach the *Marriage Licence Request Form* with clear and legible copies of your identification. Once it has been processed, our staff will contact you for pick-up arrangements. Please present the same identification as faxed/emailed to complete the process and obtain the application. *Both parties are required to be present to sign the affidavit and issue the marriage licence.*
- Applications and completion/pick-up of marriage licence applications can be made during the following hours:

#### Callingwood Registries

Monday to Friday 9:00 am – 7:45 pm  
Saturday 9:00 am – 3:45 pm

#### West-End Registries

Monday to Friday: 8:30 am – 5:45 pm  
Thursday 8:30 am - 7:45 pm  
Saturday 10:00 am - 3:45 pm

- Once the marriage licence has been issued, you may be required to supply this to your Marriage Commissioner to hold until the day of the event.
- Approximately 1 week after the date of marriage, you may order the marriage certificate in order to prove marriage/name change. As we greatly value your business, we are pleased to offer you a discount of \$5.00 from the cost of the marriage certificate upon presentation of the receipt of the marriage licence application.

Thank you for your continued business. Congratulations!

Updated: 2011/01/21

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## MARRIAGE LICENCE REMOTE REQUEST FORM

### REQUESTERS INFORMATION

LAST NAME		FIRST NAME	
ADDRESS			
CITY		PROV/STATE	POSTAL / ZIP
PHONE	FAX	E-MAIL ADDRESS	
PAYMENT TYPE (CIRCLE) <b>VISA OR M/C</b>		<b>CREDIT CARD INFORMATION (IF APPLICABLE)</b>	
PLEASE <u>ATTACH</u> TO YOUR APPLICATION: <input type="checkbox"/> CLEAR COPIES OF DRIVER'S LICENCE OR OTHER PHOTO IDENTIFICATION FOR BOTH PARTIES. <input type="checkbox"/> COPIES OF FINAL DIVORCE CERTIFICATES, IF APPLICABLE. <input type="checkbox"/> COMPLETED MARRIAGE LICENCE APPLICATION.		CREDIT CARD NUMBER	
		ISSUED TO	
		EXPIRY DATE (MM/YY)	CVV (SECURITY CODE)
DATE OF MARRIAGE: _____		CREDIT CARD HOLDER'S SIGNATURE (REQUIRED IF APPLICABLE) I AUTHORIZE WEST-END / CALLINGWOOD REGISTRIES TO USE MY CREDIT CARD FOR THE SERVICES REQUESTED	
PLACE OF MARRIAGE: _____, ALBERTA.			
PICK UP DATE AND TIME THAT BOTH PARTIES WILL BE AVAILABLE FOR:  DATE: _____  TIME: _____		APPLICANT'S SIGNATURE (REQUIRED)	

PLEASE EMAIL OR FAX YOUR APPLICATION TO OUR OFFICE FOR PROCESSING.

### FOR OFFICE USE ONLY

PROCESSING CLERK: _____	RECEIVED DATE: _____	IDENTIFICATION VERIFIED FOR BOTH PARTIES: _____
COLLECTED UNDER BOOKS TX: _____	ENTERED IN VITAL STATS. UNDER SR #: _____	
HAS THIS SERVICE BEEN COMPLETED ON VITAL STATISTICS AND AWAITING CLIENTS ARRIVAL TO OUR OFFICE:		YES                      No
IF NOT, WHY: _____		
DATE / TIME, AND RESULT OF CLIENT CONTACT:		
_____	_____	_____
ATTEMPT 1	ATTEMPT 2	ATTEMPT 3

## MARRIAGE LICENCE REQUIRED INFORMATION

**NOTE: MARRIAGE LICENCES ARE VALID FOR 90 DAYS**

FOR OFFICE USE ONLY	<b>BRIDE/PARTNER 1</b>	<b>GROOM/PARTNER 2</b>
<b>PERSONAL INFORMATION</b>		
LAST NAME		
GIVEN NAME(S) (FIRST / MIDDLE)		
IDENTIFICATION		
BIRTH DATE		
AGE		
BIRTH PLACE (CITY & PROVINCE <b>OR</b> CITY & COUNTRY)		
RELIGION		
MARITAL STATUS	<input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED (PROOF REQUIRED)	<input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED (PROOF REQUIRED)
CURRENT ADDRESS (FULL ADDRESS INCLUDING POSTAL CODE)		
<b>FATHER'S INFORMATION</b>		
LAST NAME		
GIVEN NAME(S) (FIRST / MIDDLE)		
BIRTH PLACE (CITY & PROVINCE <b>OR</b> CITY & COUNTRY)		
<b>MOTHER'S INFORMATION</b>		
MAIDEN NAME		
GIVEN NAME(S) (FIRST / MIDDLE)		
BIRTH PLACE (CITY & PROVINCE <b>OR</b> CITY & COUNTRY)		