

APPLICATION FORM TO REGISTER A MARRIAGE FOLLOWING  
ISSUE OF FULL GENDER RECOGNITION CERTIFICATE

Please read the attached guidance note before completing this form.

	<i>Applicant 1</i>	<i>Applicant 2</i>
1. If you registered your marriage before 16 <sup>th</sup> December 2014 and only one of you has obtained a full gender recognition certificate do you wish the Register of marriages to show the original date of your marriage?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
2. Forename(s)*		
Surname(s)*		
Surname(s) when existing marriage was registered		
3. Date of existing marriage registration		
4. Place of existing marriage registration		
5. Occupation*		
6. Country of birth*		
7. Usual residence*		
8. Father's/Parents forename(s), surname(s), occupation or whether retired, and whether living*		

9. Mother's/Parents forename(s), surname(s), occupation or whether retired, and whether living*		
10 Preferred designation (please tick)	<input type="checkbox"/> Bride <input type="checkbox"/> Bridegroom <input type="checkbox"/> No designation	<input type="checkbox"/> Bride <input type="checkbox"/> Bridegroom <input type="checkbox"/> No designation
11 Contact telephone number		
12 Email address		
13		
<i>(Signed by applicant)</i>		<i>(Signed by applicant)</i>
<i>(Date)</i>		<i>(Date)</i>

\*at the time of this application. You only need to provide these details if your marriage was registered before 16<sup>th</sup> December 2014; only one of you has obtained a full gender recognition certificate; and you do not wish the register to show the original date of the marriage.

