



APPLICATION FOR ONE-DAY MARRIAGE OFFICIANT LICENSE

(N.Y. Domestic Relations Law Section 11-D)

Please print:

Applicant Name: _____ Phone # _____

Mailing Address: _____

Email: _____ Date of Birth: _____

Persons to be married (as appears on marriage license)

Name: _____

Name: _____

Address: _____

Address: _____

Date of Birth: _____

Date of Birth: _____

I duly swear/affirm that the information provided above is true and accurate.

Applicant Signature

Date

Subscribed and sworn to/affirmed before me this _____ day of _____, 20____.

Town Clerk/Deputy Town Clerk

Applicant Identification: Drivers License ___ Passport ___ Other (list type) ___
\$25.00 fee Cash ___ Check # ___ Date paid: _____ Receipt No. _____

One-Day Marriage Officiant License

This One-Day Marriage Officiant License is issued to _____ to perform the marriage of the parties listed above within the boundaries of New York State and shall expire after the ceremony or upon the expiration of the marriage license, whichever occurs first.

Town Clerk/Deputy Town Clerk
3311 Wende Road, Alden, NY 14004

Date Issued