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CMO-2

REGISTRATION OF MARRIAGE

PLEASE COMPLETE IN BLACK INK AND BLOCK HANDWRITTEN

GROOM/PARTNER 1: FORENAMES & SURNAME:

.....

.....

ID NUMBER: **DATE OF BIRTH:**

BRIDE/PARTNER 2: FORENAMES & SURNAME:

ID NUMBER: **DATE OF BIRTH:**

DATE OF MARRIAGE: **PLACE OF MARRIAGE:**

AFTER MARRIAGE I WANT MY SURNAME TO BE (BRIDE):

.....

SIGNATURE OF THE GROOM/SPOUSE/PARTNER

DATE

.....

SIGNATURE OF THE BRIDE/ /SPOUSE/PARTNER

DATE

TELEPHONE No.:

E-MAIL ADDRESS:

POSTAL ADDRESS: