



**City of Marlborough, Massachusetts
CITY CLERK DEPARTMENT**

**Steven W. Kerrigan
City Clerk**

**REQUEST FORM FOR
A MARRIAGE CERTIFICATE**

YOUR REQUEST SHOULD INCLUDE:

1. The completed request form.
2. Payment of \$10.00 per Certified copy – Check or Money Order (payable to the City of Marlborough).
3. If either party's parents were **NOT** married at the time of birth, the record is restricted and **REQUIRES A COPY OF A VALID GOVERNMENT ISSUED PHOTO ID**. Only the individuals on the record may obtain copies.

Number of
Copies Ordered: _____

Date of Marriage _____

Full Name of Party A

First

Middle

Last

Maiden (If Applicable)

Full Name of Party B

First

Middle

Last

Maiden (If Applicable)

Relationship of Requestor to Person(s) Named on Record _____

Requestor's Name _____

Mailing Address _____

City

State

Zip Code

Daytime Phone _____

Signature of Requestor

Date