



The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

Intention No. _____

NOTICE OF INTENTION OF MARRIAGE

The following notice of intention of marriage is hereby given in compliance with law.

1. _____, 20____
REHOBOTH
2. TO THE CLERK OF _____, MASSACHUSETTS

PARTY A (Please Print)

3. PRESENT NAME: (First, Middle, Last)

GROOM'S NAME NOW

3A. SURNAME TO BE USED AFTER MARRIAGE:

LAST NAME TO BE USED AFTER MARRIAGE

4. DATE OF BIRTH: (Month, Day, Year)

4A. AGE:

Write out Month (May 9, 1980)

5. OCCUPATION: _____

6. RESIDENCE: _____

(Number and Street)

(City/Town, State/Country, Zip Code)

7. THIS MARRIAGE

7A. Status of last marriage

☐ Widowed ☐ Divorced☐ Void or annulled by court order☐ Void, under former GL c.207/§11 or
by operation of law at time of marriage

If void, please provide clerk with evidence (see reverse)

7B. Am/was member of: ☐ Civil Union ☐ Domestic Partnership

(State/Country) _____

7C. If so, dissolved?

☐ Yes☐ No

8. BIRTHPLACE: (City/Town)

(State/Country)

9. NAME OF PARENT (First, Middle, Last)

(Surname at birth or adoption)

Mother's Name Now**Maiden**

10. NAME OF PARENT (First, Middle, Last)

(Surname at birth or adoption)

Father's Name

22. SEX

☐ Male☐ Female24. RELATED by blood or marriage to Party B? ☐ Yes ☐ No

If yes, how? _____

PARTY B (Please Print)

11. PRESENT NAME: (First, Middle, Last)

BRIDE'S NAME NOW

11A. SURNAME TO BE USED AFTER MARRIAGE:

LAST NAME TO BE USED AFTER MARRIAGE

12. DATE OF BIRTH: (Month, Day, Year)

12A. AGE:

Write out Month (May 9, 1980)

13. OCCUPATION: _____

14. RESIDENCE: _____

(Number and Street)

(City/Town, State/Country, Zip Code)

15. THIS MARRIAGE

15A. Status of last marriage

☐ Widowed ☐ Divorced☐ Void or annulled by court order☐ Void, under former GL c.207/§11 or
by operation of law at time of marriage

If void, please provide clerk with evidence (see reverse)

15B. Am/was member of: ☐ Civil Union ☐ Domestic Partnership

(State/Country) _____

15C. If so, dissolved?

☐ Yes☐ No

16. BIRTHPLACE: (City/Town)

(State/Country)

17. NAME OF PARENT (First, Middle, Last)

(Surname at birth or adoption)

Mother's Name Now**Maiden**

18. NAME OF PARENT (First, Middle, Last)

(Surname at birth or adoption)

Father's Name

23. SEX

☐ Male☐ Female25. RELATED by blood or marriage to Party A? ☐ Yes ☐ No

If yes, how? _____

PENALTY: M.G.L. c.207 §52 "...whoever falsely swears or affirms in making any statement required...shall be punished by a fine..."

I have reviewed a list of impediments to marriage and hereby state that there is an absence of any legal impediment to this marriage and do hereby depose and say that all of the statements as set forth in the above notice whereof I could have knowledge are true and are made under the penalties of perjury (M.G.L. c.4 §6, Rule 6 General Laws).

Party A (Signature) _____

Party B (Signature) _____

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

Registrar, Clerk, or Assistant Clerk designated to administer oaths: _____

Marriage Certificate Issued: _____, 20____ Not Valid After: _____, 20____

(60 days from date intention is filed. M.G.L. c.207 §20)

