CIVIL PARTNERSHIP ADDITIONAL INFORMATION

For official use: RD/Entry details

Witnesses

You are required by law to have two witnesses present at your partnership who are 16 years of age or over and are capable of understanding the ceremony. Please enter in BLOCK CAPITALS the FULL names (<u>including middle names</u>) and addresses of the people who are going to act as the witnesses. Please confirm with your witnesses their names are spelt correctly.

| 1. | Forename(s) Surname Address | | |
|--------------|---|---|--|
| | Postcode | | |
| 2. | Forename(s) Surname Address | | |
| | Postcode | | |
| | If for any reason you wish to later change the name of a witness, please inform the Registrar as soon as possible. Civil Partnership Certificate After my ceremony, I wish my certificate to be posted to the following address:- | | |
| soor Civi | n as possible. I Partnership Cer | rtificate | |
| soor Civi | n as possible. I Partnership Cer | rtificate | |
| Civi Afte | n as possible. I Partnership Cer r my ceremony, I v | rtificate wish my certificate to be posted to the following address:- | |