

Request for Marion Vital Record

To request a birth, death or marriage certificate please fill in the appropriate section below. **Send this form together with a check for \$5.00 for each certificate requested** to: Town Clerk, 2 Spring St., Marion, MA 02738

Please include a self-addressed, stamped business sized envelope.

Please make sure you *sign* the bottom portion of this form.

If the record is restricted (*parents were not married at time of birth, father not named, or in a marriage if any parents were not married at the time of either partner's birth*): please send a photocopy of your driver's license, since only those named on the certificate have a right to said document.

I WISH TO REQUEST A BIRTH CERTIFICATE FOR:

Name of Child: _____

Date of Birth: _____

Name of Mother (if known): _____

Name of Father (if known): _____

Number of Copies Requested: _____

I WISH TO REQUEST A DEATH CERTIFICATE FOR:

Name of Decedent: _____

Date of Death: _____

Name of parents (if known): _____

Number of Copies Requested: _____

I WISH TO REQUEST A MARRIAGE CERTIFICATE FOR:

Name of Partner: _____

Name of Partner: _____

Date of Marriage: _____

Number of Copies Requested: _____

Note: Marriages are recorded where the partners applied for their license, NOT where they got married.

Signature of requestor: _____