

## The United Church of Canada, Living Skies Regional Council - Archives

Living Skies Regional Council, 60A Athabasca St. E., Moose Jaw, Saskatchewan S6H 0L2 livingskiesarchives@united-church.ca | www.livingskiesrc.ca/resources/archives/

# **Request for Church Marriage Record**

**PART 1:** 

<b>Contact Information</b>	
NAME:	
ADDRECC.	
PHONE:	EMAIL:
Reason for this Request:	
Are you requesting your	own record?
Requested Record - M Please fill out this section, to SPOUSE 1:	IARRIAGE the best of your ability. Gaps in information may lead to incomplete results.
SPOUSE 2:	
SPOUSE 2 – PARENTS:	
MARRIAGE DATE:	CHURCH:
LOCATION: _	(e.g. town, city, municipality, village, or closest likely community involved)
NOTE: Fees are calculated l	based on the number of events and number of registers we are asked to look in. onfirm you accept the fees (or not), before we carry out a search.
If the record is found, I wo	ould like the transcript be directed to me by (check one or both)
E-MAIL at this	s address:
MAIL (Canada only) at this	s address:
I agree that the information be used for any unlawfu	tion provided to me will be used for the reason stated above and will not il or improper purposes.
Signature:	Date:

If you are requesting your <u>own</u> record, you are done after the signature! However, if your request is for someone else's record, DON'T STOP HERE – continue on to PART 2.

Last modified August 29, 2023

(Person Requesting Records)



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# **Request for Church Marriage Record**

#### **PART 2:**

### **Access to Records**

If you are requesting another person's marriage record, please complete this section (check all that apply).		
This marriage occurred more than 80 years ago.  I am the legal representative of one/both persons named in the marriage record.  I am the child of the persons named in the marriage record.		
I have written authorization from one/both persons named in the marriage record.		
My relationship is:		
Signature: Date: (Person Requesting Access)		

Marriage records become open to the public 80 years after the event took place. Prior to that, access is limited, in order to protect the personal information of the individuals, in accordance with United Church of Canada and Living Skies Regional Council privacy policies and relevant legislation.

### **Authorization**

For these purposes, written authorization may take the form of an attached signed letter of consent OR the completed and signed "Consent to Release Information" statement (below).

CONSENT TO RELEASE INFORMATION*		
I,(Name of person authori	· · · ·	
RECORD OF MARRIAGE to _	(Name of person being authorized – PRINTED)	
Signature:	Date:	

# **Exceptions**

If both parties are deceased and you have a valid reason for needing the record but are not authorized under any of the listed conditions, you may still request access to the records. Please provide your explanation in writing (by e-mail or regular post).

If you have questions or need further clarification, e-mail the Living Skies Regional Council Archivist, at livingskiesarchives@united-church.ca or phone 306-704-0181.