

STATE OF VERMONT
PROBATE COURT
DISTRICT OF CHITTENDEN, SS.

REQUEST FOR AUTHORIZATION TO PERFORM MARRIAGE CEREMONY

Full Name of Groom: _____

Address: _____

Full Name of Bride: _____

Address: _____

Date of Ceremony: _____

Place of Ceremony: _____

You must attach to this form some proof of your ordination as a minister authorized to perform marriages in your denomination.

Date: _____

Signed: _____

Petitioner

Address: _____

Return completed request form to: Chittenden Probate Court
P. O. Box 511
Burlington, Vermont 05402-0511

FEE: \$25.00 payable to Chittenden Probate Court