

**REPUBLIC OF UGANDA
FORM A
NOTICE OF MARRIAGE.
THE MARRIAGE ACT CAP. 251**

To The **Registrar of Marriages** for The District of Uganda.
I give you notice that a Marriage is intended to be had within three months from the date of this notice between me, the undersigned, and the other party named in the notice.

Name	Marital Condition (Bachelor/Spi nster widower/widow Divorcee)	Occupation (Rank or Profession)	Age (Date of Birth)	Dwelling or place of abode	Consent (if any) and by whom given

Witness my hand, this day of, 20

Name

Signature

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UGANDA REGISTRATION SERVICES BUREAU

CERTIFICATE DETAILS

COUPLE:

NAME	MARITAL CONDITION Bachelor/spinster; Widow/Widower; Divorcee; Married	OCCUPATION	AGE	RESIDENCE OR PLACE OR ABODE	FATHER'S NAME	FATHER'S OCCUPATION
1. MAN (Groom)						
2. WOMAN (Bride)						

WITNESSES

NAME	MARITAL CONDITION Bachelor/spinster; Widow/Widower; Divorcee; Married	OCCUPATION	AGE	RESIDENCE OR PLACE OR ABODE	FATHER'S NAME	FATHER'S OCCUPATION
1.1 st Witness (MALE)						