APPLICATION TO BE PLACED ON THE STATEWIDE REGISTRY OF PERSONS AUTHORIZED TO PERFORM MARRIAGES IN WEST VIRGINIA

According to WV Code §48-2-402

West Virginia Secretary of State Building 1, Suite 157-K 1900 Kanawha Boulevard East Charleston WV 25305

Phone: 1-304-558-6000 or toll free: 1-866-767-8683

Email: <u>licensing@wvsos.com</u> Filing fee: \$25.00

Name:			
(last name)	(first name)	(middle name)	
Mailing Address:			
	(City)	(State)	(Zip)
Phone Number: ————	Denomination:		
Authorization: You must forward the appropria	ate information for the following:		
	of age or older. Show proof by se, military ID or passport.	ubmitting copy	of birth
2. Certificate/ordination pa	pers from your church or religious	s organization.	
	nembers of the church or religious ommunion or other proof of good nization.		
I certify that the information	I have provided is accurate and o	correct.	
	(signat	ure of applicant)	

NOTE: Once this application has been approved in the West Virginia Secretary of State's Office, your name will be listed on the state registry of persons authorized to perform marriages. Contact our office if your status changes or you wish to be removed from the marriage registry