



APPLICATION FOR MARRIAGE COMMISSIONER PROGRAM

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| Community of: <h2 style="text-align: center; margin: 0;">HARRISON HOT SPRINGS</h2> | Return this completed form no later than the closing date of: <h2 style="text-align: center; margin: 0;">JULY 11, 2024</h2> <p style="text-align: center; margin: 0;">NOTE: Email applications timestamped after the closing date, and mail applications postmarked after the closing date, are not considered.</p> |
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Instructions: Please complete this form, print, sign and mail or email to the address listed on the Vital Statistics Agency's Marriage Commissioner website.

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|--|-----------|--|-----------|
| Last Name | | First Name | |
| Residential Street Address | | | |
| Mailing Address (include Postal Code) | | | |
| Telephone Number (include area code) | | Email Address | |
| 1. Do you have voice mail or an answering machine? | Yes No | 2. Do you own a computer? | Yes No |
| 3. Do you have internet access in your home? | | Yes No | |
| 4. How far is your home from the centre of your community? | | Less than 5 km 5 - 10 km Over 10 km | |
| 5. How many years have you resided in the posted community? | | _____ | |
| 6. What is your current work status? | | Full-time Retired Part-time Retiring _____ <small style="margin-left: 150px;">Date</small> | |
| If you work full-time or part-time, please provide your work schedule below: _____ | | | |
| 7. What are your current or previous occupations and/or business activities? What memberships do you have and/or volunteer work do you perform? What aspects of your background do you think will assist you to perform this public service? _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ | | | |
| 8. What interests you in the public service role of performing civil marriage ceremonies? _____ _____ _____ _____ | | | |

9. Are you prepared to perform marriage ceremonies, without reservation, for all couples as authorized by the Human Rights Code of British Columbia (e.g. race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, or sexual orientation)? Yes
No

10. Declare any affiliations, business or personal, that may be perceived as a conflict of interest, including those by immediate family members (e.g. bed & breakfast, flower shop, photography, restaurant or catering business).

11. When do you generally take vacation and what is the normal length of your annual vacation?

If you take vacation between June and September, indicate the length of time.

Less than 1 week 1 week 2 weeks or more Other (specify) _____

12. Do you speak any languages other than fluent English?

Yes No If yes, list the other language(s): _____

13. What mode of transportation would you use to get to and from a civil ceremony?
if using a mode other than your personal vehicle, please explain the reason for your choice of transportation.

REFERENCES

1 Name _____

Address _____

Phone number _____
(include area code)

2 Name _____

Address _____

Phone number _____
(include area code)

APPLICANT SIGNATURE

 _____

Signature Date