OFF-SITE CEREMONY REQUEST FORM

Arrangements cannot be made unless a marriage license is obtained from or a domestic partnership registration filed with San Francisco County.

DATE REQUEST BEING MADE: _____

1st PERSON'S NAME: _____ **ADDRESS:** _____ _____ **PHONE NUMBER:** _____ **EMAIL ADDRESS:** _____	**2nd PERSON'S NAME:** _____ **ADDRESS:** _____ _____ **PHONE NUMBER:** _____ **EMAIL ADDRESS:** _____
CEREMONY DAY (must be weekend or City holiday) **SATURDAY** **SUNDAY** **HOLIDAY:** _____	**CEREMONY DATE:** _____ **CEREMONY TIME:** _____ **NUMBER OF GUESTS:** _____
CEREMONY LOCATION ADDRESS** **(must be in San Francisco)** _____ _____ **INDOOR** **OUTDOOR**	**PREFERRED ATTIRE FOR COMMISSIONER/CLERK** **(circle one)** **ROBE(BLACK)** **PROFESSIONAL ATTIRE**

***Fee: $239.00 (*subject to change)**
$139 non-refundable fee payable to: SF County Clerk at time of submitting this request form
$100 CASH balance paid to the Marriage Commissioner/Deputy County Clerk on the day of the ceremony

FOR OFFICE USE:

***NON-REFUNDABLE $139 FEE PAID:** _____ (DATE) _____ (RECEIPT #)

TYPE: **PUBLIC ML** **CONFIDENTIAL ML** **DOMESTIC PARTNERSHIP**

MARRIAGE COMMISSIONER/DDC: _____

**** City Hall closed Saturdays, Sundays & Holidays.**