



COUNTY CLERK, RECORDER AND ASSESSOR

Marriage Appointment Request

Non-Refundable Reservation Fee: \$23.00

Please allow 48 hours to process the application.

IMPORTANT: A marriage license must be obtained prior to, or at the time of, your scheduled ceremony appointment. It is your responsibility to ensure that you have a valid marriage license and meet all of the marriage requirements prior to your ceremony.

First Person's Full Name: _____

Second Person's Full Name: _____

Ceremony Language Preference: English or Spanish

Yes No

You must have a California Marriage License at the time of your ceremony. Do you wish to purchase a Marriage License from Santa Barbara County at the time of your scheduled appointment?

Yes No

At least one Witness is required for a Regular Marriage ceremony. One can be provided. Do you require a Witness for a \$51.00 fee?

Location:

- Santa Barbara - 1100 Anacapa Street, Hall of Records, Santa Barbara CA 93101
- Santa Maria - 511 E. Lakeside Parkway Suite 115, Santa Maria CA 93455-1341

Please Note: If you have reserved a County Courthouse Venue, receipt of the reservation is required at the time of the ceremony.

Date:

Preference #1: Date _____

Time (select **one**): 9:00 AM 10:00 AM 11:00 AM 2:00 PM 3:00 PM

Preference #2: Date _____

Time (select **one**): 9:00 AM 10:00 AM 11:00 AM 2:00 PM 3:00 PM

Options to return the form:

- **Fax:** (805) 568-2266 with attached credit card authorization form.
- **Mail:** PO Box 159, Santa Barbara CA 93102 with check or attached credit card authorization form.
- **In person** at our Santa Barbara or Santa Maria locations.

Your appointment is not guaranteed until your transaction has been processed and you have received a confirmation letter with the date, time and rules governing your marriage appointment. If your requested appointment date/time is not available, you will be contacted for an alternative appointment date/time.

Requestor Name: _____

Phone #: () _____

Email Address: _____

Mailing Address: _____

JOSEPH E. HOLLAND
County Clerk, Recorder and Assessor
Registrar of Voters



Hall of Records
1100 Anacapa St.
Santa Barbara, CA 93101

Mailing Address:
PO Box 159
Santa Barbara, CA 93102

MELINDA GREENE
Chief Deputy Clerk-Recorder

**COUNTY CLERK, RECORDER AND ASSESSOR
CLERK-RECORDER DIVISION**

CLERK-RECORDER CREDIT CARD AUTHORIZATION FORM

VISA/MASTERCARD/DISCOVER ONLY
NO AMERICAN EXPRESS

I hereby authorize the Office of the County Clerk-Recorder to charge the following credit card for payment of requested service:

Applicant Name: _____

Phone #: (_____) _____

Cardholder (name as appears on credit card): _____

Credit Card Number: _____ **Exp Date:** ____ / ____
(American Express Not Accepted)

Address: _____

City: _____ **State:** _____ **Zip:** _____

Cardholder Phone Number: (_____) _____

Cardholder Signature: _____ **Date:** ____ / ____ / ____

Note: This credit card authorization form will be kept on file for 60 days from date of service. Any disputed charges made in conjunction with this request, shall be made within 45 days from date of service.

<p>OFFICE USE ONLY</p> <p>Transaction #: _____</p>
