

Form 223 - ACC

BIRTHS, DEATHS AND MARRIAGES OFFICE OF REGULATORY SERVICES **Department of Justice and Community Safety**

APPLICATION TO REGISTER A **CIVIL PARTNERSHIP WITH** CEREMONY BY NOTARY

Civil Partnerships Act 2008

Births, Deaths and Marriages Registration Act 1997 Births, Deaths and Marriages Registration Regulations 1998



IMPORTANT INFORMATION

This form must be used by a registered civil partnership notary to apply to the Registrar-General for registration of a relationship as a civil partnership. In accordance with section 6A(b) of the Civil Partnerships Act 2008, if the partners may marry under the Marriage Act 1961, they are not eligible for a civil partnership ceremony by a civil partnership notary. A civil partnership provides a way for two adults, over 18 years of age, who are in a relationship as a couple, regardless of their sex, to have their relationship legally recognised by registration as a civil partnership. To enter into a civil partnership the proposed civil partners must not be married, be in another civil partnership, or be in a prohibited relationship. A prohibited relationship between proposed civil partners is defined as being a lineal ancestor, lineal descendent or sibling or half sibling. At least one of the proposed civil partners must be a current resident of the Australian Capital Territory (ACT). Applicants should be aware of their responsibilities under the Civil Partnerships Act 2008. You can view or download the Act from www.legislation.act.gov.au.

A Notice of Intention to Enter into Civil Partnership must be provided to the Registrar-General before the proposed partners can make their declaration.

PRIVACY INFORMATION

The Births, Deaths and Marriages Registration Act 1997 authorises the Registrar-General to collect the information required by this form. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the Privacy Act 1988 (C'wlth). The Registrar-General may provide identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances. Documents provided as proof of identity may have their authenticity verified through Certificate Validation System (CVS) and the National Document Verification System (DVS). Documents issued by this office may also be verified by external agencies using CVS and/or DVS.

CONTACT INFORMATION

Send completed forms to the Office of Regulatory GPO Box 158, Canberra ACT 2601

Lodge in person at the Office of Regulatory Services: 255 Canberra Avenue, Fyshwick ACT 2609

Office Hours: 9:00am to 4:30pm Monday to Friday

General enquiries telephone number: (02) 6207 0460 Website address: www.ors.act.gov.au

INSTRUCTIONS FOR COMPLETION

- If completing this form by hand please print clearly and use a blue or black pen only.
- This office will not accept lodgement of this form if it is not completed in full.
- Any alteration to information provided on this form must be struck through with a blue or black pen and substitute information must be clear and all parties must sign in the margin. Do not use white out or
- This form must be accompanied by a fully completed 'Notice of Intention to Enter into Civil Partnership Form' and lodged with the Registrar-General no later than two weeks after the date of the civil partnership is
- This form must be signed by the civil partnership partners, at least one witness and a registered civil partnership notary.

TRANSLATING AND INTERPRETING SERVICE

If you require further information or need advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.



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Civil Partnerships Act 2008 Births, Deaths and Marriages Registration Act 1997 Births, Deaths and Marriages Registration Regulations 1998

Registration Number (Office use only)				Contact Phone num of Partners	nber/s	
DETAILS OF PARTNERS						
		PARTNER 1			PARTNER 2	
Surname (As appears on your POI document)						
Given Name(s) (As appears on your POI document)						
Occupation						
Usual Place of Residence (One of the parties must reside in the ACT)						
Place of Birth (City/Town, Australian State or Territory, or if born overseas, city/town and country)						
Date of Birth						
Relationship Status (other than relationship with proposed civil partner)		Single Widowed		nestic Partnership orced	Single Widowed	Domestic Partnership Divorced
Mother's Surname						
Mother's Given Name(s)						
Father's Surname						
Father's Given Name(s)						

DECLARATION BY CIVIL PARTNER(S)						
PARTNER 1	PARTNER 2					
I, (full name)	I, (full name)					
being a (occupation)	being a (occupation)					
of (address)	of (address)					
Postcode	Postcode					
hereby solemnly declare that I wish to enter into a civil	hereby solemnly declare that I wish to enter into a civil					
partnership with	partnership with					
(name of partner 2)	(name of partner 1)					
(name or partner 2)	(name or partner 1)					
and that I am not married or in a civil partnership, and	and that I am not married or in a civil partnership, and					
believe I do not have a prohibited relationship with my	believe I do not have a prohibited relationship with my					
proposed partner. I also acknowledge that I am freely	proposed partner. I also acknowledge that I am freely					
entering into a civil partnership.	entering into a civil partnership.					
Cianatura (C	Cianatura (C					
Signature (of partner 1)	Signature (of partner 2)					
WITNESSES TO CIVIL PARTNERSHIP DECLARATION						
In accordance with Section 8B of the Civil Partnerships Act 2008 I/we acknowledge witnessing the civil partnership						
declaration made by the partners described above.	of the acknowledge withessing the civil partnersing					
· ·						
Full Name (of witness 1)	Full Name (of witness 2 if applicable)					
Signature (of witness 1)	Signature (of witness 2 if applicable)					
DETAILS OF REGISTERED CIVIL PARTNERSHIP NOTARY WITNESSING DECLARATION						
In accordance with Costion OD of the Civil Double evaluate Act 200						
In accordance with Section 8B of the Civil Partnerships Act 2006	8 I acknowledge witnessing the civil partnership declaration					
made by the partners described above.						
Declared at (place of ceremony)	on (date of ceremony)					
Before me, (Full Name of notary)						
Civil Partnership Notary Registration Number						
Signature (of the notary)						