



**REPUBLIC OF NAMIBIA  
MINISTRY OF HOME AFFAIRS  
DEPARTMENT OF CIVIC AFFAIRS  
DECLARATION FOR THE PURPOSE OF A MARRIAGE**

**PARTICULARS OF APPLICANT**

1. Surname (present legitimate surname in the case of a woman): \_\_\_\_\_

2. Maiden name: \_\_\_\_\_

3. First Names: \_\_\_\_\_

4. Date of birth: Year     Month   Day   5. Sex: \_\_\_\_\_

6. Marital status: State bachelor, spinster, widower, widow or divorcee: \_\_\_\_\_

7. Country of birth: \_\_\_\_\_

8. Postal address: \_\_\_\_\_

**PARTICULARS OF PROSPECTIVE \*HUSBAND/WIFE**

9. Surname (present legitimate surname in the case of a woman): \_\_\_\_\_

10. Maiden name: \_\_\_\_\_

11. First Names: \_\_\_\_\_

I \* declare under oath/solemnly declare that the particulars given above are to the best of my knowledge and belief true and correct and -

(i) that we are not within the prohibited degrees of relationship;

(ii) that there is no lawful impediment to our marriage; and

\*\* (iii) that I have the written consent of my \*parents/guardian/Commissioner of Child Welfare/the Cabinet/a competent court, as the case may be;

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* Delete whichever is not applicable  
\*\* Delete the whole of the item if applicant is a major.

I certify that before administering the prescribed oath/affirmation I asked the deponent the following questions and wrote down his/her answers in his/her presence:

- (1) Do you know and understand the contents of this declaration?
- (2) Do you have any objection to taking the prescribe oath?
- (3) Do you consider the prescribe oath to be binding on your conscience?

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirm before me and that the deponent's signature/thumbprint/mark was placed thereon in my presence at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_

Signed:

\_\_\_\_\_  
Commissioner of Oaths  
  
\_\_\_\_\_  
First Names

\_\_\_\_\_  
Designation(Park)  
  
\_\_\_\_\_  
Area