



MINISTRY OF TOURISM
REPUBLIC OF MALDIVES

APPLICATION FORM FOR REGISTRATION OF SYMBOLIC WEDDING VOWS SERVICE

New permit Renewal Change of Details

Resort Information

Name of the Resort: _____

Name of the Island and Atoll: _____

Name and Address of the Lessee: _____

Name and Address of the Operator: _____

Tel / Mobile: _____ Fax: _____ E-mail: _____

Details of the General Manager

Name: _____

Passport/ ID No: _____ Tel / Mobile: _____

Fax: _____ E-mail: _____

Details of the Resident Manager/Assistant Manager

Name: _____

Passport/ ID No: _____ Tel / Mobile: _____

Fax: _____ E-mail: _____

Information of the person in charge of wedding ceremony/function

Name: _____

Designation: _____ Passport/ID No: _____

E-mail: _____

Signature: _____

Information of the person performing wedding vows

Name: _____

Designation: _____ Passport/ID No: _____

E-mail: _____

Signature: _____

I hereby declare that the information given above is correct:

Name of the Operator:	Company Seal:
Designation:	
Signature:	
Contact:	Date:

Additional Document to be submitted with the Application:

- **Copy(s) of speech/advice/vows should be submitted with this application.**
- **Original of the previous registration certificate**
- **ID card copies of the person in charge of Wedding function and the person performing wedding vows.**

Note:

If any information given in this Application form should change the Ministry of Tourism should be notified of the change and the Application form should be submitted to the Ministry no later than 3 working days from the change of to amend the Application form accordingly.

-Thank you-

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