



3. MARRIAGE REGISTRATION

Applications can be made either in person or via mail.

Marriage must be in jurisdiction of Turkish Consulate General in New York (NY, NJ, DE, PA)

Required documents:

1. Application forms (Encl.)
2. Original "Marriage Certificate" and a copy ("Marriage Record" is NOT accepted.)
3. Turkish ID's of both partners,
(Please note that foreign spouse's original birth certificate and passport or notarized copies. If there are differences on the birth certificate and passport, supplementary document must be submitted to prove the changes),.
4. Form for maiden name (**If the woman would like to keep her maiden name with the marriage surname**) (Encl.)
5. Court decision or death certificate for previous marriages, if any,
6. If you would like to have all documents you submitted returned to your postal address, pre-paid return envelope (with your address on and tracking number).

- **Notarized copies of original documents are also accepted for applications via mail.**

Fee:

\$31 for mailing (for your documents to be mailed to Turkey)

Application Method:

Please make an appointment on www.konsolosluk.gov.tr

Important note:

It is mandatory to submit notarized (notary public) translations of documents, written in different languages other than Turkish and English.

Additional information:

Application fee can only be paid in cash or money order payable to the Turkish Consulate General in NY. Personal checks are not accepted.

TURKISH CONSULATE GENERAL IN NEW YORK

I got married to who is a
Citizen, in (state name) on/...../.....
(dd/mm/yyyy). Please register my marriage at the related Census Office as per information
below.

Name, Surname	
Address in Turkey	
Turkish phone	
Residency Address in the USA:	
Home phone	
Work phone	
Mobile phone	
E-mail address	
Date	dd/mm/yyyy
Signature	

MARRIAGE REGISTRATION FORM

WOMAN		MAN	
Does your father and mother live?	Father <input type="checkbox"/> Yes <input type="checkbox"/> No	Does your father and mother live?	Father <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mother <input type="checkbox"/> Yes <input type="checkbox"/> No		Mother <input type="checkbox"/> Yes <input type="checkbox"/> No
Names and residency addresses of mother and father Full name of the mother: Full name of the father :		Names and residency addresses of mother and father Full name of the mother: Full name of the father :	
Have you got married before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you got married before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(If yes, please provide us the court order)			
Please check if applicable		Please check if applicable	
<input type="checkbox"/> Islam <input type="checkbox"/> Christian – Catholic <input type="checkbox"/> Christian – Orthodox <input type="checkbox"/> Christian – Protestant <input type="checkbox"/> Christian – Gregorian <input type="checkbox"/> Christian – Other <input type="checkbox"/> Jewish <input type="checkbox"/> Assyrian <input type="checkbox"/> Assyrian Archaic <input type="checkbox"/> Buddhist <input type="checkbox"/> Atheist <input type="checkbox"/> Other (Please specify)		<input type="checkbox"/> Islam <input type="checkbox"/> Christian – Catholic <input type="checkbox"/> Christian – Orthodox <input type="checkbox"/> Christian – Protestant <input type="checkbox"/> Christian – Gregorian <input type="checkbox"/> Christian – Other <input type="checkbox"/> Jewish <input type="checkbox"/> Assyrian <input type="checkbox"/> Assyrian Archaic <input type="checkbox"/> Buddhist <input type="checkbox"/> Atheist <input type="checkbox"/> Other (Please specify)	
Occupation :		Occupation :	

TO TURKISH CONSULATE GENERAL IN NEW YORK

I would like to keep my maiden name along with my husband's surname as per 4721 Turkish Civil Law, Act 187.

Name, Surname	
Turkish ID Number	
Maiden surname	
Residency address	
Home phone	
Mobile Phone	
Work phone	
E-mail address	
Date	
Signature	