



Civil marriage questionnaire

Desired wedding date _____ at _____ o'clock.

Wedding ceremonies take place on Wednesday and Friday afternoons. In exceptional cases and depending on availability, weddings may be held on another day of the week. A written request stating the reasons must be submitted in advance to the Biergerzenter.

Language of the ceremony:

The ceremony may be conducted in Luxembourgish, German, French or English.

Only one language is used during the ceremony.

Number of adults:

Number of children:

The maximum number of participants in the wedding ceremony is 20 people, including children.

Would you like to exchange wedding rings during the ceremony? Yes No

Would you or your guests like to have alcoholic drinks at the reception hosted by the municipality after the ceremony? Yes No

The future spouse 1

Last name:

First name:

Birthdate:

Place of birth:

Nationality:

Marital status:

single divorced

Date of divorce decree:

Date and place of last marriage:

Last married partner:

widowed

civil partnership

Surname and first name, if different from future married partner

Current address:

Postcode: L-

Town:

Previous address:

Postcode: L-

Town:

(only to be completed if you changed your place of residence more than 6 months ago)

Phone number:

E-mail:

Parent 1 of future spouse 1

Last name:

First name:

Address :

Date of death:

Are the parents married to each other? Yes No

Parent 2 of future spouse 1

Last name:

First name:

Address :

Date of death:

The future spouse 2

Last name:

First name:

Birthdate:

Place of birth:

Nationality:

Marital status:

single divorced

Date of divorce decree:

Date and place of last marriage:

Last married partner:

widowed civil partnership

Surname and first name, if different from future spouse

Current address:

Postcode: L-

Town:

Previous address:

Postcode: L-

Town:

(only to be completed if you changed your place of residence more than 6 months ago)

Phone number:

E-mail :

Parent 1 of future spouse 2

Last name:

First name:

Address :

Date of death:

Are the parents married to each other? Yes No

Parent 2 of future spouse 2

Last name:

First name:

Address :

Date of death:

Additional information:

The time and date of the wedding ceremony will only be confirmed and set by the registrar once all required documents have been submitted.

This form should be returned to Commune de Steinfort - B.P. 42 - L-8401 STEINFORT or biergerzenter@steinfort.lu. Do not hesitate to ask for additional forms or information, if necessary, by phoning 39 93 13-500.

I, the undersigned, declare that the information provided on this form is accurate.

Place & date:

Signature



Formular auf DE



Formulaire en FR



The information collected in this application form is necessary in order to proceed with your request for the "Civil marriage questionnaire".

These personal data are subject to a computerised data treatment which is necessary in the context of your request. Only the municipality of Steinfort will have access to this information. The data you provide will be kept for the necessary period in order to fulfil the above-mentioned purposes or as long as required by law.

In accordance with the Regulation (EC) 2016/679 on the processing of personal data and on the free movement of such data, you have the right to access, rectify, erase or request the restriction of the processing of your data. You have the right to object to the processing of your personal data, the right to dereference of your data and the right to challenge a decision resulting from an automated process.

You also have the right to lodge a complaint with the National Commission for Data Protection (CNPD), if you believe that the processing of your data does not comply with the law. To exercise your rights provided by the law or to withdraw your consent to the processing of your personal information, please contact the Data Protection Officer of the municipality of Steinfort by e-mail to: dpo@steinfort.lu, or by post to:

DPO - Commune de Steinfort 4, Square Patton L-8443 Steinfort.

By filling in and returning this form, you consent to the use of your personal data for the purpose of your application for a "Civil marriage questionnaire".