



## APPLICATION FOR CONGRATULATORY

# WEDDING ANNIVERSARY MESSAGE

Office of External Relations, Protocol Unit, GPO Box 2343, ADELAIDE SA 5001

Phone: (08) 8226 3631 or (08) 8226 3604

Facsimile: (08) 8226 9421 - Email: [protocol@dpc.sa.gov.au](mailto:protocol@dpc.sa.gov.au)

### IMPORTANT – PLEASE READ

- Please complete all sections of this form, attach the necessary photocopies and post, fax or email to the Office of External Relations, Protocol Unit.
- The Protocol Unit process messages to be sent by the Premier of South Australia as well as advises the offices of the Governor-General, the Governor, Prime Minister, Federal and State Leaders of the Opposition, and Federal and State Members of Parliaments for 50th, 60th, 65th, and 70th Anniversaries.
- In addition to the above, the Protocol Unit also advises the offices of Her Majesty The Queen, for 60th, 65th and 70th Wedding Anniversaries only.
- The Protocol Unit can only process applications for recipients who are residents of South Australia. Please contact the relevant state Department of the Premier for recipients residing in other states.
- Applications should be sent to the Protocol Unit no less than two (2) months and no more than six (6) months prior to the date of the anniversary. Applications received with less than two (2) months notice will be processed but cannot be guaranteed to arrive by the date of the anniversary.
- Unfortunately, applications received by our office later than four weeks after the anniversary cannot be processed.

### PERSON REQUESTING MESSAGE

Title: \_\_\_\_\_ Name: \_\_\_\_\_ Surname: \_\_\_\_\_  
 Street: \_\_\_\_\_ Suburb: \_\_\_\_\_  
 State: \_\_\_\_\_ Post Code: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

### COUPLE CELEBRATING ANNIVERSARY

Surname: \_\_\_\_\_

#### Husband

Title: Mr Dr Prof Other: \_\_\_\_\_

Given Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Preferred name if different (Example – Given name is Robert prefers to be known as Bob)

Date of Marriage:        /        /

#### Wife

Title: Mrs Ms Dr Prof Other: \_\_\_\_\_

Given Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Anniversary: 50th 60th 65th 70th (please circle one)

Please note that documentary evidence (photocopy only) proving the year of marriage **must** be attached to this application. A Marriage Certificate is preferred, but a child's Birth Certificate, which includes the year of marriage or a Statutory Declaration stating the year of marriage, is acceptable.

#### Residential Address

(of couple celebrating anniversary)

Retirement / Care Facility Name: (if applicable)

Street: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Post Code: \_\_\_\_\_

#### Postal Address

(for message to be sent, if different from residential address)

Name: \_\_\_\_\_

Street: \_\_\_\_\_

Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Post Code: \_\_\_\_\_