

City of Sedona Civil Union Registration Statement

We the undersigned declare that:

- 1. We are in a relationship of mutual support, caring, and commitment and are responsible for each other's welfare;
- 2. Neither of us is in a marriage expressly recognized by the State of Arizona or in any domestic partnership and/or civil union with another person;
- 3. We are both at least 18 years of age;
- 4. We are not related by blood closer than would bar marriage in the State of Arizona, and we are mentally competent to enter into a contract;
- 5. We will file a Civil Union Termination Statement if there is a change in the status of our relationship such that we cease to meet the criteria for a Civil Union.
- 6. We are aware that in addition to this Registration Statement, we have the option (but not the requirement) of filing a Statement of Shared Intent and/or a List of Agreements that document the rights, responsibilities, and obligations that we have established between us.
- 7. We acknowledge and understand that all documents we provide to the City of Sedona in connection to the registration of our Civil Union are public record and shall be subject to disclosure by the City upon request.

Please include the \$50 fee payable to the "City of Sedona" for processing the registration.

First	M.I.	Last	First	M.I.	Last
Date of Birth			Date of Birth		
Mailing Address			Mailing Address		
City	State	Zip	City	State	Zip
Phone #			Phone #		
Signature			Signature		
State of Arizona)			State of Arizona))
County of)			County of)		
Subscribed and sworn (or affirmed) before			Subscribed and sworn (or affirmed) before		
me on this	s day of	,	me on this day of		
20 b	V		20 by		
		above (NOT NOTARY)	Name of Signer above (NOT NOTARY)		
Notary Public Signature			Notary Public Signature		