

APPLICATION FOR MARRIAGE LICENSE

(Please print)

Full Name _____
First Middle Current Surname

Name after Marriage _____ / _____
Middle Last Birth Name (if different than current name)

Social Security Number _____ - _____ - _____ Sex _____ (Optional)

Age _____ Date of Birth ____ / ____ / ____ Place of Birth _____
City / State

Residence _____
State County City/Town/Village

Street Address Zip Code

Employment Usual Occupation _____

Father or Parent Name _____
Last (Maiden name, if applicable) First

Father or Parent Birthplace (Country) _____

Mother or Parent Name _____
Last (Maiden name, if applicable) First

Mother or Parent Birthplace (Country) _____

Number of this Marriage _____

Contact number: Home: _____ Cell: _____

Address to mail Certificate of Marriage Registration to:

Street Apt. No City/Town State Zip

IF PRIOR MARRIAGE – HOW DID MARRIAGE? ANNULMENT/DEATH, IF DIVORCE MUST PROVIDE DOCUMENTATION WITH DATED SIGNATURE OF JUDGE, PLACE ISSUED, AND AGAINST SELF, SPOUSE OR NO FAULT

REQUIRED: (Clerk to complete)

Proof of Age: Birth Certificate with raised seal, Baptismal Records, Naturalization Record or Census Record

Proof of Identity: Drivers License, Passport, Immigration Record or Employment Picture ID