

MARRIAGE LICENSE APPLICATION
APPLICANT 1

Please Print

NAME _____
FIRST MIDDLE LAST JR./SR.

SOCIAL SECURITY NUMBER _____ - _____ - _____

ADDRESS _____
STREET/ROAD CITY STATE ZIP CODE

COUNTY OF RESIDENCE _____ PHONE _____ - _____ - _____

PLACE OF BIRTH _____
CITY COUNTY STATE

BIRTHDATE _____
MONTH DAY YEAR AGE

FATHER'S FULL NAME _____
FIRST MIDDLE LAST

MOTHER'S FULL NAME _____
FIRST MIDDLE LAST(MAIDEN)

OCCUPATION _____ PREVIOUSLY MARRIED? _____
YES/NO

IF YES, HOW MANY TIMES _____ : #DIVORCES _____ #WIDOWED _____

NAMES AND AGES OF MINOR CHILDREN: _____
NAME AGE

NAME AGE NAME AGE

NAME AGE NAME AGE

EXPECTED DATE OF MARRIAGE _____

NAME OF PERSON PERFORMING MARRIAGE _____

MARRIAGE LICENSE APPLICATION
APPLICANT 2

Please Print

NAME _____
FIRST MIDDLE LAST JR./SR.

SOCIAL SECURITY NUMBER _____ - _____ - _____

ADDRESS _____
STREET/ROAD CITY STATE ZIP CODE

COUNTY OF RESIDENCE _____ PHONE _____ - _____ - _____

PLACE OF BIRTH _____
CITY COUNTY STATE

BIRTHDATE _____
MONTH DAY YEAR AGE

FATHER'S FULL NAME _____
FIRST MIDDLE LAST

MOTHER'S FULL NAME _____
FIRST MIDDLE LAST(MAIDEN)

OCCUPATION _____ PREVIOUSLY MARRIED? _____
YES/NO

IF YES, HOW MANY TIMES _____: #DIVORCES _____ #WIDOWED _____

NAMES AND AGES OF MINOR CHILDREN: _____
NAME AGE

NAME AGE NAME AGE

NAME AGE NAME AGE

EXPECTED DATE OF MARRIAGE _____

NAME OF PERSON PERFORMING MARRIAGE _____