APPLICATION FOR MARRIAGE LICENSE

(Please Print)

Full Name			
First		Middle	Last
Social Security Number		Ge	nder
Surname after Marriage		Birth Name (if different)	
Home Address			
Street		City/town	
	· · · · · · · · · · · · · · · · · · ·		
County		State	Zip
Phone Number/Contact Number			
Date of birth	Age	Place of birth	
Employment: Usual Occupation _			
Type of Business			
Father or Parent Name			
Father or Parent Birthplace (Country			
Mother or Parent Name	· · · · · · · · · · · · · · · · · · ·		
Mother or Parent Birthplace (country	<u> </u>		
Number of this marriage			
Address to mail Certificate of Marria	ge Registration:		
REQUIRED: (Clerk to complete)			
Proof of Age:			
Birth Certificate Baptismal R	ecords	Naturalization Record	Census Record
Proof of Identity:			
Drivers License Passport	Immigration	Record Employme	nt Picture ID
Documented Divorce? Yes	No		