

(Front/Back)

# MARRIAGE LICENSE APPLICATION FOR GROOM

**INSTRUCTIONS: PROOF OF AGE IS REQUIRED; \$53 APPLICATION FEE IS REQUIRED; BOTH PARTIES MUST APPEAR BEFORE THE CLERK TO SIGN FOR LICENSE**

<b>TELEPHONE NUMBER(S):</b>			
<b>(HOME)</b> _____		<b>(CELL)</b> _____	
<b>(WORK)</b> _____			
FULL :First (Sr., Jr., III, etc)	Middle	Last	Suffix
Age:	Date of Birth: / /	Where Born ( County/State):	Race:
Current Physical Address of Residence: _____			
County:	CITY:	STATE:	ZIP:
Mailing Address (if different from above Physical Address): _____			
P.O. BOX/DRAWER: _____			
CITY:	STATE:	ZIP:	
Number of Previous Marriages: _____	Last Marriage Ended By: ___ Death ___ Divorce/ Annulment (check one)		
Date Last Marriage Ended: / /			
Father's Full Name			
Address			
City, State, Zip			
Mother's Full Maiden Name			
Address			
City, State, Zip			

*(Please print clearly)*

EDUCATION: CHECK ONLY THE HIGHEST LEVELS OF EDUCATION COMPLETED
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(Front/Back)

Elementary Doctorate Professional or High School	1 2 3 4 5 6 7 8 9 10 11 12 No Diploma GED College Some No Diploma Associate Bachelor's Master's Other	Date of Ceremony: _____ Place of Ceremony: _____ _____ Official to Perform Ceremony/Rites: _____ Official's Phone # _____ # _____
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***I, a contracting party named above, hereby certify and attest that the information completed is correct to the best of my knowledge and belief.***

**MALE APPLICANT**

\*Proof of Age Submitted: (To be completed by Clerk or D.C.)

Driver's License ____	Identification Card ____	Birth Certificate ____
Other ____		

Date Application Completed: \_\_\_\_\_ Time: \_\_\_\_\_ am/pm Date of Ceremony: \_\_\_\_\_

Date to sign/pick up License: \_\_\_\_\_

OVER >