MARRIAGE LICENSE APPLICATION

Please complete this marriage license application and return it to the Town Clerk's Office.

Date of Wedding: _____

Officiant Performing the Ceremony: _____

Location of Ceremony: _____

Daytime Telephone Number: _____

Residence Address After the Ceremony: _____

_____

FROM THE GROOM	FROM THE BRIDE
1. A. Full Name _____ First Middle Current surname	1. A. Full Name _____ First Middle Current surname
B. Birth name, if different _____	B. Birth name, if different _____
C. Surname after marriage _____	C. Surname after marriage _____
D. Social Security No. _____	D. Social Security No. _____
2. A. State _____ B. County _____	2. A. State _____ B. County _____
C. Check one ___ City ___ Town ___ Village and specify _____	C. Check one ___ City ___ Town ___ Village and specify _____
D. Street Address _____	D. Street Address _____
E. Is residence within limits of City or Incorporated Village? ____ Yes ____ No	E. Is residence within limits of City or Incorporated Village? ____ Yes ____ No
3. A. Age ____ B. Date of Birth _____	3. A. Age ____ B. Date of Birth _____
4. Employment	4. Employment
A. Usual Occupation _____	A. Usual Occupation _____
B. Type of Industry or Business _____	B. Type of Industry or Business _____
5. Place of Birth _____	5. Place of Birth _____
6. Father's Name _____	6. Father's Name _____
Country of Birth _____	Country of Birth _____
7. Mother's Maiden Name _____	7. Mother's Maiden Name _____
Country of Birth _____	Country of Birth _____
8. Number of this Marriage _____	8. Number of this Marriage _____
9. Previous Marriages	9. Previous Marriages
A. Number of Previous Marriages which Ended by Divorce Civil Annulment Death _____ _____ _____	A. Number of Previous Marriages which Ended by Divorce Civil Annulment Death _____ _____ _____
B. How did last marriage end? ____ Divorce _____ Annulment _____ Death	B. How did last marriage end? ____ Divorce _____ Annulment _____ Death
C. Date last marriage ended _____	C. Date last marriage ended _____
D. Are there any former spouses alive? Yes _____ No _____	D. Are there any former spouses alive? Yes _____ No _____
10. If previously divorced or annulled, provide the following information:	10. If previously divorced or annulled, provide the following information:
Date of Decree Place Issued Against Whom (Month,day,year) (City, State, Country) Self Spouse 1st _____ ___ ___ 2nd _____ ___ ___ 3rd _____ ___ ___	Date of Decree Place Issued Against Whom (Month,day,year) (City, State, Country) Self Spouse 1st _____ ___ ___ 2nd _____ ___ ___ 3rd _____ ___ ___