MARRIAGE LICENSE Worksheet
(Please print)

Full Name _____
First **Middle** **Current Surname**

Surname after Marriage _____ / _____
Maiden Name (if applicable)

Social Security Number _____ - _____ - _____

Residence _____
Street address City/Town/Village Zip code

_____
County

Age _____ Date of Birth _____ / _____ / _____ Sex (optional) ____

Employment: Usual Occupation _____

Type of Business _____

Place of Birth: City & State_____

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: _____ e-mail _____

Address to mail Certificate of Marriage Registration to:

_____
Street Apt. No City/Town State Zip

REQUIRED: (Clerk to complete)
Proof of Age:
Birth Certificate

AND

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

Documented Divorce? Yes No need to see document