

**THE NAMES ON YOUR MARRIAGE LICENSE SHOULD MATCH WHAT IS ON YOUR BIRTH CERTIFICATE.
PLEASE INCLUDE FULL "LEGAL" NAMES FOR BOTH APPLICANTS AND PARENTS.**

MARRIAGE WORKSHEET			
APPLICANT #1: PHONE # AND SIGNATURE		APPLICANT #2: PHONE # AND SIGNATURE	
1a. APPLICANT #1-FULL NAME (First, Middle, Last, Suffix)		1b. MAIDEN LAST NAME (if applicable)	2. AGE
3a. COUNTRY	3b. STATE	3c. COUNTY	
3d. CITY, TOWN OR LOCATION	3e. ADDRESS		3f. ZIP CODE
4. BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		5. DATE OF BIRTH (Mo,Day,Yr)	
6a. FATHER'S FULL NAME (First, Middle, Last, Suffix)		6b. BIRTHPLACE (City and State or Foreign Country)	
7a. MOTHER'S FULL MAIDEN NAME (First, Middle, Maiden)		7b. BIRTHPLACE (City and State or Foreign Country)	
8a. APPLICANT #2-FULL NAME (First, Middle, Last, Suffix)		8b. MAIDEN LAST NAME (if applicable)	9. AGE
10a. COUNTRY	10b. STATE	10c. COUNTY	
10d. CITY, TOWN OR LOCATION	10e. ADDRESS		10f. ZIP CODE
11. BIRTHPLACE (City and State or Foreign Country)		12. DATE OF BIRTH (Mo,Day,Yr)	
13a. FATHER'S FULL NAME (First, Middle, Last, Suffix)		13b. BIRTHPLACE (City and State or Foreign Country)	
14a. MOTHER'S FULL MAIDEN NAME (First, Middle, Last, Suffix)		14b. BIRTHPLACE (City and State or Foreign Country)	
CONFIDENTIAL INFORMATION: INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES OF THIS RECORD.			
15a. APPLICANT #1 - SOCIAL SECURITY NUMBER		15b. APPLICANT #2 - SOCIAL SECURITY NUMBER	
16. If previously married, last marriage ended either by-			
APPLICANT #1: _____ Death _____ Dissolution _____ Annulment		Date Marriage Ended (mm/dd/yyyy) _____	
APPLICANT #2: _____ Death _____ Dissolution _____ Annulment		Date Marriage Ended (mm/dd/yyyy) _____	
17a. Is APPLICANT #1 of Hispanic or Latino Origin ___ Yes ___ No		17b. Is APPLICANT #2 of Hispanic or Latino Origin ___ Yes ___ No	
RACE			
Check one or more races to indicate what each person considers him/herself to be:			
18a. APPLICANT #1		18b. APPLICANT #2	
_____	White	_____	_____
_____	Black or African American	_____	_____
_____	American Indian or Alaska Native	_____	_____
_____	Asian	_____	_____
_____	Native Hawaiian or Other Pacific Islander	_____	_____

**The fee for the marriage license is \$25. A certified copy of the marriage license is required in order for the applicant to change their last name, e.g. Driver's License, Social Security, etc.
The cost of a certified copy is \$9. The total fee due at the time of application is \$34.**

MAIL CERTIFIED COPY TO: Applicant #1 Address _____ Applicant #2 Address _____ Other Address: _____