

1st Party _____ 2nd Party _____ Male _____ Female _____

Anticipated Date of Marriage ____/____/____ ** _____ Military

Wedding Location: County _____, City _____

Current Name: Last _____, First _____

Middle _____ Birth Last Name _____

Social Security Number ____/____/____

Date of Birth ____/____/____ Age _____

State of Birth _____ Race _____

If other than the USA, what is your Country of birth? _____

Years of Education: Elementary/Secondary # _____ years College # _____ years

What is Number of This Marriage # _____

IF previously married, how did it end?

Annulment _____ Death _____ Divorce _____

Month and Year Last Marriage Ended ____/____

Current Address: _____

City _____ State _____ Zip _____ County _____

Mailing Address: _____

If not a resident of the USA, what Country? _____

Current Phone# (_____) _____ - _____

FULL Signature _____

(First, Middle and Last)