

MARRIAGE LICENSE APPLICATION

Groom	1a. GROOM - 1st Name		Groom - Middle Name		Groom - Current Last Name		1b. GROOM BIRTH SURNAME		2. Date of Birth		
	3a. Place of Residence-State			3b. County		3c. City/Village/Town of:			4. State of Birth		
	5. FATHER - 1st Name		Full Middle		Last		6. MOTHER - 1st Name		Full Middle		Birth Surname
Bride	7a. BRIDE - 1st Name		Bride - Middle Name		Bride - Last Name		7b. BRIDE BIRTH SURNAME		8. Date of Birth		
	9a. Place of Residence-State			9b. County		9c. City/Village/Town of:			10. State of Birth		
	11. FATHER - 1st Name		Full Middle		Last		12. MOTHER - 1st Name		Full Middle		Birth Surname
15. LICENSE NO. 100		16. ISSUED BY COUNTY CLERK <i>Brenda J. Jaszewski</i>				17. DATE ISSUED (Month/Day/Year)		18. ISSUING COUNTY WASHINGTON			
Groom	P1. Age	P2. Proof of Age		P3. Guardianship Status <small>Requires Permission from Parent or Guardian?</small>		P4. Resident of this County <small>for 30 days prior to application?</small>		P5. Proof of Residency			
	<input type="checkbox"/> Cert. Birth Cert. <input type="checkbox"/> Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> D.L. <input type="checkbox"/> Other:						
Bride	P1. Age	P2. Proof of Age		P3. Guardianship Status <small>Requires Permission from Parent or Guardian?</small>		P4. Resident of this County <small>for 30 days prior to application?</small>		P5. Proof of Residency			
	<input type="checkbox"/> Cert. Birth Cert. <input checked="" type="checkbox"/> Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> D.L. <input type="checkbox"/> Other:						
P8. No. of this marr.	P9. If Previously married, last marriage ended by:		P10. Date Last Marriage Ended:		P11. Proof of How Last Marriage Ended (Required if this is not first marriage)						
<input type="checkbox"/> Divorce <input type="checkbox"/> Annul. <input type="checkbox"/> Death	<input type="checkbox"/> Divorce <input type="checkbox"/> Annul. <input type="checkbox"/> Death	<input type="checkbox"/> Div./Annul. Decree <input type="checkbox"/> Div./Annul. Cert. <input type="checkbox"/> Death Cert. <input type="checkbox"/> Other:									
P.6 Are the Bride and Groom Related?		If "Yes", Declare Relationship:		If First Cousins (even by 1/2 blood), Attach proof of sterility if bride is under 55.							
<input type="checkbox"/> Yes <input type="checkbox"/> No											
P12. APPLICATION TAKEN BY:		P13. FEE PAID:		P14. 5-DAY WAITING PERIOD WAIVED?		P15. WAIVER FEE PAID		P16. WAIVER NUMBER:			
				<input type="checkbox"/> Yes <input type="checkbox"/> No							
Date of Marriage		County of Marriage		City, Village, Town			Status <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town				
Officiant Name					Officiant Title (Wisconsin Judge, Court Commissioner or Licensed/Ordained Clergy)						
Officiant Mailing Address (Street, City, State, ZIP Code)							Officiant Telephone Number				
The issue of this license shall not be deemed to remove or dispense with any legal disability, impediment or prohibition rendering marriage between the parties illegal. This license is valid for 30 days after the date issued by the County Clerk (s. 765.12).											
STATE OF WISCONSIN } SS Washington County					STATE OF WISCONSIN } SS Washington County						
I, _____					I, _____						
hereby swear or affirm that the information provided on this application is correct to the best of my knowledge and belief and that I am free to marry under the laws of this state on the date of the intended marriage.					hereby swear or affirm that the information provided on this application is correct to the best of my knowledge and belief and that I am free to marry under the laws of this state on the date of the intended marriage.						
→ _____					→ _____						
SIGNATURE - GROOM (Male)					SIGNATURE - BRIDE (Female)						
Subscribed and sworn to or affirmed before me this _____ day of _____, _____					Subscribed and sworn to or affirmed before me this _____ day of _____, _____						
_____ Deputy Co. Clerk					_____ Deputy Co. Clerk						
WASHINGTON County, Wisconsin					WASHINGTON County, Wisconsin						
WARNING: Per Chapters 765.08 and 765.20, Wis. Stats., persons intending to marry in the state must complete this form and obtain a valid license to marry before the marriage can take place. Any person falsely swearing to or affirming any parts of this application has violated Chapter 765.30, Wis. Stats. and may be fined not more than \$10,000 or imprisoned not more than 9 months, or both. The non-confidential portion of this form is an open record and may be reviewed by any member of the public. Reports of fraudulent information will be reported to local law enforcement. This office reserves the right to verify information provided by the applicants, including information on the status of prior marriages.											
CONFIDENTIAL INFORMATION [Chapters 69.20 (2) and 69.16, Wisconsin Statutes] Information collected below is confidential except as noted.											
1. Social Security Numbers may only be released for Child Support Enforcement program purposes per Chapter 69.20(3), Wis. Stats., and federal law 42 USC 666(a)(5). You must provide your Social Security Number if you have been assigned a number. If you have a Social Security number but refuse to give it, the County Clerk cannot issue you a marriage license.											
2. The street address entered below can be given to a law enforcement officer who requests this information under provisions of Chapters 765.09(3) and 765.20(2), Wis. Stats. The length of time the address is kept on file varies by county.											
3. The contact information may be given to the Register of Deeds or the State Vital Records Office, if necessary, to ensure the timely filing of an accurate and complete marriage certificate. If this form is used as the marriage docket, the information below must be detached and is not open to public inspection.											
GROOM					BRIDE						
SOCIAL SECURITY NO.		RACE		EDUCATION Elem./Sec. College (0-12) 1-4 or 5+		SOCIAL SECURITY NO.		RACE		EDUCATION Elem./Sec. College (0-12) 1-4 or 5+	
<input type="checkbox"/> Mail to Bride		<input type="checkbox"/> Mail to Groom		<input type="checkbox"/> Mail to Officiant		<input type="checkbox"/> Will Pick Up					
Mailing Address of Groom and/or Bride						Telephone of Groom and/or Bride					
Mailing Address of Officiant or Other						Additional Phone Number					