

### 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. <b>100</b>	16. ISSUED BY COUNTY CLERK	17. DATE ISSUED (Month/Day/Year)	18. ISSUING COUNTY <b>WASHINGTON</b>
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Groom	P1. Age	P2. Proof of Age <input type="checkbox"/> Cert. Birth Cert. <input type="checkbox"/> Other:	P3. Guardianship Status Requires Permission from Parent or Guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No	P4. Resident of this County for 30 days prior to application? <input type="checkbox"/> Yes <input type="checkbox"/> No	P5. Proof of Residency <input type="checkbox"/> D.L. <input type="checkbox"/> Other: _____
	P8. No. of this marr.	P9. If Previously married, last marriage ended by: <input type="checkbox"/> Divorce <input type="checkbox"/> Annul. <input type="checkbox"/> Death	P10. Date Last Marriage Ended:	P11. Proof of How Last Marriage Ended (Required if this is not first marriage) Div./Annul. Decree <input type="checkbox"/> Div./Annul. Cert. <input type="checkbox"/> Death Cert. <input type="checkbox"/> Other: _____	

Bride	P1. Age	P2. Proof of Age <input type="checkbox"/> Cert. Birth Cert. <input type="checkbox"/> Other:	P3. Guardianship Status Requires Permission from Parent or Guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No	P4. Resident of this County for 30 days prior to application? <input type="checkbox"/> Yes <input type="checkbox"/> No	P5. Proof of Residency <input type="checkbox"/> D.L. <input type="checkbox"/> Other: _____
	P8. No. of this marr.	P9. If Previously married, last marriage ended by: <input type="checkbox"/> Divorce <input type="checkbox"/> Annul. <input type="checkbox"/> Death	P10. Date Last Marriage Ended:	P11. Proof of How Last Marriage Ended (Required if this is not first marriage) 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", Declare Relationship:	If First Cousins (even by 1/2 blood), Attach proof of sterility if bride is under 55.
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P12. APPLICATION TAKEN BY:	P13. FEE PAID: \$100.00	P14. 5-DAY WAITING PERIOD WAIVED? <input type="checkbox"/> Yes <input type="checkbox"/> No	P15. WAIVER FEE PAID	P16. WAIVER NUMBER:
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Date of Marriage	County of Marriage	City, Village, Town	Status <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town
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Officiant Name	Officiant Mailing Address (Street, City, State, ZIP Code)	Officiant Telephone Number
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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, _____ 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.	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.
→ _____ <b>SIGNATURE - GROOM (Male)</b> Subscribed and sworn to or affirmed before me this _____ day of _____, _____ _____ Deputy Co. Clerk <b>WASHINGTON County, Wisconsin</b>	→ _____ <b>SIGNATURE - BRIDE (Female)</b> Subscribed and sworn to or affirmed before me this _____ day of _____, _____ _____ Deputy Co. Clerk <b>WASHINGTON County, Wisconsin</b>

**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.

- 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.**
- 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.
- 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			
Mailing Address of Officiant or Other				Telephone of Groom and/or Bride			
Mailing Address of Officiant or Other				Additional Phone Number			