

MARRIAGE APPLICATION - STATE OF FLORIDA ONLY

GROOM (Please print)

BRIDE (Please print)

Full Name: _____
(First, Middle & Last)

Full Name: _____
(First, Middle & Last)

County of Residence: _____

County of Residence : _____

Race (circle): Am. Indian/Asian/Black/Hispanic
Oriental/Other/White

Race (circle): Am. Indian/Asian/Black/Hispanic
Oriental/Other/White

Social Security No.: _____

Social Security No.: _____

Date of Birth: _____

Date of Birth: _____

***** If you are not at least 18 years of age, please notify Clerk ******

City of Residence: _____

City of Residence: _____

State of Residence: _____

State of Residence: _____

Maiden Name: _____

Birthplace: _____
(State or Foreign Country)

Birthplace: _____
(State or Foreign Country)

Previous Marriage Information

Previous Marriage Information

Is this your first marriage? _____(Y/N)

Is this your first marriage? _____(Y/N)

If no, what number marriage is this? _____

If no, what number marriage is this? _____

If no, how did your last marriage end? (circle)
Death/Divorce/Annulment

If no, how did your last marriage end? (circle)
Death/Divorce/Annulment

Date last marriage ended (mm/dd/yy)_____

Date last marriage ended (mm/dd/yy)_____

Mailing address:

Phone number:

Have you together/separately completed a premarital preparation course? _____ (Y/N)

When do you plan to be married? _____(mm/dd/yy)

**MUST BE MARRIED IN
IN THE STATE OF FLORIDA ONLY**

**GROOM'S INITIALS _____
BRIDE'S INITIALS _____**

We attest that we have obtained and read or otherwise accessed the information contained in the Family Law Handbook or other electronic media presentation of the rights and responsibilities of parties to a marriage specified in F.S. 741.0306.

Grooms signature: _____

Brides signature: _____

Date: _____