

APPLICATION FOR VERMONT LICENSE OF MARRIAGE

FEE FOR MARRIAGE LICENSE: \$20

COST OF CERTIFIED COPY: \$7

GROOM	
1. NAME (First, Middle, Last)	2. DATE OF BIRTH (Month, Day, Year)
3. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)	
4a. USUAL RESIDENCE - STATE	4b. CITY OR TOWN
5. BIRTHPLACE (State or Foreign Country)	
6a. FATHER'S NAME (First, Middle, Last)	6b. BIRTHPLACE (State or Foreign Country)
7a. MOTHER'S NAME (First, Middle, Maiden Surname)	7b. BIRTHPLACE (State or Foreign Country)

BRIDE	
8a. NAME (First, Middle, Last)	8b. MAIDEN SURNAME
9. DATE OF BIRTH (Month, Day, Year)	
10. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)	
11a. USUAL RESIDENCE - STATE	11b. CITY OR TOWN
12. BIRTHPLACE (State or Foreign Country)	
13a. FATHER'S NAME (First, Middle, Last)	13b. BIRTHPLACE (State or Foreign Country)
14a. MOTHER'S NAME (First, Middle, Maiden Surname)	14b. BIRTHPLACE (State or Foreign Country)

THE INFORMATION BELOW IS CONFIDENTIAL AND WILL NOT APPEAR ON CERTIFIED COPIES OF THE RECORD.

GROOM		IF PREVIOUSLY MARRIED		EDUCATION (Specify only highest grade completed)	
20. NAME	22. NO. OF THIS MARRIAGE (1st, 2nd, etc.)	LAST MARRIAGE ENDED BY	DATE	Elementary or Secondary (0-12)	College (1-4 OR 5+)
21. RACE - White, Black, American Indian, etc. (Specify)		<input type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE <input type="checkbox"/> ANNULMENT	MONTH YEAR		
		23a.	23b.	24.	
BRIDE		IF PREVIOUSLY MARRIED		EDUCATION (Specify only highest grade completed)	
25. NAME	27. NO. OF THIS MARRIAGE (1st, 2nd, etc.)	LAST MARRIAGE ENDED BY	DATE	Elementary or Secondary (0-12)	College (1-4 OR 5+)
26. RACE - White, Black, American Indian, etc. (Specify)		<input type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE <input type="checkbox"/> ANNULMENT	MONTH YEAR		
		28a.	28b.	29.	

IF YOU ARE NOT FROM VERMONT, IS THERE A REASON YOU CANNOT MARRY IN YOUR STATE? YES NO

DOES EITHER PARTY HAVE A LEGAL GUARDIAN? YES NO

APPLICANTS			
We hereby certify that the information provided is correct to the best of our knowledge and belief and that we are free to marry under the laws of Vermont.			
15a. SIGNATURE	15b. DATE SIGNED	15c. SIGNATURE	15d. DATE SIGNED

Planned marriage date _____ Location (City or Town) _____

Officiant Name & Address _____

Your mailing address after wedding _____

Do you want a certified copy of your Marriage Certificate? (\$7.00) Yes No

Date License issued _____ Clerk issuing License _____

THIS WORKSHEET MAY BE DESTROYED AFTER MARRIAGE IS REGISTERED