

STATE OF COLORADO APPLICATION FOR MARRIAGE LICENSE County of _____ License # _____

MALE APPLICANT:

Legal Name: _____
First Middle Name Last Suffix

Address: _____
Number/Street City State/ Zip

Birth Date: ____/____/____ Last name at birth if different (opt): _____

Social Security Number: _____ City&State of Birth: _____

Parent/Legal Guardian: _____ City&State: _____
First Middle Name Last

Parent /Legal Guardian: _____ City&State: _____
First Middle Name Last

Present Marital/Union Status: (circle one) Single Widowed Divorced/Dissolved Married Civil Union

If Divorced/Dissolved or Widowed Date: ____/____/____ City&State: _____ Type of Court: _____

Proof of Age: (circle one) Valid Drivers License Passport Birth Certificate Other (specify) _____

FEMALE APPLICANT:

Legal Name: _____
First Middle Name Last Previous Married Name

Address: _____
Number/Street City State/Zip

Birth Date: ____/____/____ Last name at birth if different (opt): _____

Social Security Number: _____ City&State of Birth: _____

Parent/Legal Guardian: _____ City&State: _____
First Middle Name Last

Parent /Legal Guardian: _____ City&State: _____
First Middle Name Last

Present Marital/Union Status: (circle one) Single Widowed Divorced/Dissolved Married Civil Union

If Divorced/Dissolved or Widowed Date: ____/____/____ City&State: _____ Type of Court: _____

Proof of Age: (circle one) Valid Drivers License Passport Birth Certificate Other (specify) _____

Are the applicants related by blood? Y or N How? _____

Married Status: (circle one) Common Law Renewing your vows Other (specify) _____

OATH: We the undersigned hereby make application for a license to unite in marriage and under oath we state that the information given is true and correct to the best of our knowledge, that neither applicant is under legal guardianship, or have provided written consent or judicial order, and believe that there exists no reason why we should not be married.

MALE Signature: _____ FEMALE Signature: _____

Subscribed and sworn to me this ____ day of _____, 20__ at _____ m.

County Clerk and Recorder By: _____ Deputy County Clerk

Type of Ceremony: (circle one) Religious Civil Self Date of Ceremony: _____
Return Mail Address _____ Recording Info _____