INSTRUCTIONS FOR MARRIAGE APPLICATION

- **Fill in all information under each Applicants section,**
  only sign application in front of Clerk at office.
- **Date Marriage ended & Docket # and S.S.# will be completed in the office.**
- **Print the form and bring it with you to the Register & Recorders Office.**
- **Cost of Marriage License is $40.00 cash or check make check payable to Clerk of the Orphans' Court.**
- **Office hours are 8:30A.M. – 4:00 P.M. (Don't forget Photo ID & Divorce Decree**
  if necessary)
- **Hand written applications will not be accepted.**

Filed:	Issued:	Number:

MARRIAGE LICENSE APPLICATION WORKSHEET

Applicant A			Applicant B		
Name: (first, full middle, last)	**Maiden Name:**		**Name:** (first, full middle, last)	**Maiden Name:**	
Address:	**County**		**Address:**	**County**	
City:	**State:**	**Zip:**	**City:**	**State:**	**Zip:**
Birthplace: (City & State or Country)	Date of Birth:	Age:	Birthplace: (City & State or Country)	Date of Birth:	Age:
Transmissible Disease? Yes ☐ No ☐ (Check one)	If previously married, last marriage ended by: **Death** ☐ **Divorce** ☐ **Annulment** ☐ (Check one of above) Date Marriage ended: _____ Docket # _____		Transmissible Disease? Yes ☐ No ☐ (Check one)	If previously married, last marriage ended by: **Death** ☐ **Divorce** ☐ **Annulment** ☐ (Check one of above) Date Marriage ended: _____ Docket # _____	
Education	Elementary/Secondary (0-12) Grade completed:	College (1-4 or 5+) Years completed:	Education	Elementary/Secondary (0-12) Grade completed:	College (1-4 or 5+) Years completed:
Usual Occupation:			Usual Occupation:		
Current Phone Number:			Current Phone Number:		
Parental Information			**Parental Information**		
Father's Name (first, full middle, last)			**Father's Name** (first, full middle, last)		
Birthplace (City & State or Country)	Occupation		Birthplace (City & State or Country)	Occupation	
Father's Residence City:	State:		Father's Residence City:	State:	
Mother's Name (first, full middle, last)	Maiden Surname		**Mother's Name** (first, full middle, last)	Maiden Surname	
Birthplace (City & State or Country)	Occupation		Birthplace (City & State or Country)	Occupation	
Mother's Residence City:	State:		Mother's Residence City:	State:	

We verify that the statements made in the foregoing application are true and correct to the best of our knowledge, information and belief. The undersigned understands that the statements made therein are subject to the penalties of 18Pa. C. S. Section 4904, relating to unsworn falsification to authorities.

_____ Signature of Applicant A

_____ Signature of Applicant B

Sworn and subscribed to before me this_____day of_____A. D. 20_____

_____ (Clerk of Orphans' Court) (SEAL)