

MARRIAGE LICENSE APPLICATION

THE COST OF THE LICENSE IS \$27.50, we accept CASH ONLY. (NO BILLS LARGER THAN A \$20, please)

MARRIAGE LICENSES ARE ISSUED AT CLERK'S OFFICE BETWEEN 8:30 am and 4:00 pm-Monday-Friday

1. Before filling out this form, please obtain an identification waiver from the judge's office using your driver's license or birth certificate. This waives the law requiring us to keep your birth certificate. **THE JUDGE'S OFFICE IS CLOSED FOR LUNCH, SO PLEASE COME BETWEEN THE HOURS OF 8:30 a.m. AND 12:00 p.m. OR BETWEEN 1:30 p.m. AND 4:00 p.m.**
2. If you have been married before you **MUST** know the month, day, and year of the divorce or death of your previous spouse. **NO PAPERS ARE NECESSARY TO SHOW PROOF, UNLESS YOU HAVE BEEN DIVORCED WITHIN 30 DAYS OF APPLYING FOR LICENSE.**
3. If you are under the age of 18 you must have a certified copy of your birth certificate and both parents must sign a consent form and show their identification. If one parent has custody, a certified copy of the custody papers must be presented. If either party is under the age of 16, in addition to parents written consent, you must have a court order from the judge.
4. The license is good for **30 DAYS**. There is a 3-day waiting period but this can be waived at the judge's office.
5. Is this a covenant marriage? If so, please submit your declaration of intent and affidavit and attestation.
6. When you complete the application, please read over it and correct all spelling and numbers, etc. **Corrections can only be made before your ceremony. The fee is \$10.00. NO CORRECTIONS CAN BE MADE ONCE YOU ARE MARRIED!!**
7. Please note: If you need a certified copy of your license after the ceremony, you will need to purchase one from this office. The cost is \$6.00

After you verify the information, please proceed to the Recording Department.

PLEASE PRINT AND WRITE CLEARLY

GROOM'S/SPOUSE'S INFORMATION	BRIDE'S/SPOUSE'S INFORMATION																								
Name _____	Name _____																								
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Address _____	Address _____																								
City Limits <input type="checkbox"/> inside <input type="checkbox"/> outside	City Limits <input type="checkbox"/> inside <input type="checkbox"/> outside																								
City of residence _____	City of residence _____																								
Parish/County _____ State _____	Parish/County _____ State _____																								
Father's FULL name _____	Father's FULL name _____																								
Father was born in what state? _____	Father was born in what state? _____																								
Mother's FULL Maiden name _____	Mother's FULL Maiden name _____																								
Mother was born in what state? _____	Mother was born in what state? _____																								
Education: What was your last grade completed including college?	Education: What was your last grade completed including college?																								
Middle school <input type="checkbox"/> High School <input type="checkbox"/>	Middle school <input type="checkbox"/> High School <input type="checkbox"/>																								
College <input type="checkbox"/> if so, # of yrs _____	College <input type="checkbox"/> if so, # of yrs _____																								
<u>DO NOT</u> include trade schools or technical schools.	<u>DO NOT</u> include trade schools or technical schools.																								
Race: Mark appropriate box or boxes.	Race: Mark appropriate box or boxes.																								
<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> African American (black)</td> <td><input type="checkbox"/> Middle Eastern</td> </tr> <tr> <td><input type="checkbox"/> Asian</td> <td><input type="checkbox"/> Native American</td> </tr> <tr> <td><input type="checkbox"/> Caucasian (white)</td> <td><input type="checkbox"/> Pacific Islander</td> </tr> <tr> <td><input type="checkbox"/> Creole</td> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> East Indian</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Hispanic/Latino</td> <td></td> </tr> </table>	<input type="checkbox"/> African American (black)	<input type="checkbox"/> Middle Eastern	<input type="checkbox"/> Asian	<input type="checkbox"/> Native American	<input type="checkbox"/> Caucasian (white)	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Creole	<input type="checkbox"/> Other _____	<input type="checkbox"/> East Indian		<input type="checkbox"/> Hispanic/Latino		<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> African American (black)</td> <td><input type="checkbox"/> Middle Eastern</td> </tr> <tr> <td><input type="checkbox"/> Asian</td> <td><input type="checkbox"/> Native American</td> </tr> <tr> <td><input type="checkbox"/> Caucasian (white)</td> <td><input type="checkbox"/> Pacific Islander</td> </tr> <tr> <td><input type="checkbox"/> Creole</td> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> East Indian</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Hispanic/Latino</td> <td></td> </tr> </table>	<input type="checkbox"/> African American (black)	<input type="checkbox"/> Middle Eastern	<input type="checkbox"/> Asian	<input type="checkbox"/> Native American	<input type="checkbox"/> Caucasian (white)	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Creole	<input type="checkbox"/> Other _____	<input type="checkbox"/> East Indian		<input type="checkbox"/> Hispanic/Latino	
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SSN _____	SSN _____																								
Phone number _____	Phone number _____																								
What state were you born in? _____	What state were you born in? _____																								
DOB: _____ Age _____ Month Day Year	DOB: _____ Age _____ Month Day Year																								
How did your previous marriage end?	How did your previous marriage end?																								
Death <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment <input type="checkbox"/>	Death <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment <input type="checkbox"/>																								
Number of this marriage (1 st , 2 nd , etc.) _____	Number of this marriage (1 st , 2 nd , etc.) _____																								
Date of death, divorce or annulment _____	Date of death, divorce or annulment _____																								

Is there any blood relation between the bride/spouse & groom/spouse? Yes No