

LICENSE AND CERTIFICATE OF MARRIAGE: Town of _____

SPOUSE ONE

SPOUSE TWO

NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)		
1.			21.		
SEX	DATE OF BIRTH (Mo., Day, Year)	AGE	SEX	DATE OF BIRTH (Mo., Day, Year)	AGE
2.	3.	4.	22.	23.	24.
BIRTHPLACE (State or Foreign Country)		EDUCATION (No. Yrs. Completed)	BIRTHPLACE (State or Foreign Country)		EDUCATION (No. Yrs. Completed)
		GRADES 1-8 GRADES 9-12 COLLEGE (1-5+)			GRADES 1-8 GRADES 9-12 COLLEGE (1-5+)
5.		6. 7. 8.	25.		26. 27. 28.
RESIDENCE (No. and Street)			RESIDENCE (No. and Street)		
9.			29.		
CITY OR TOWN	COUNTY	STATE	CITY OR TOWN	COUNTY	STATE
10.	11.	12.	30.	31.	32.
SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR			SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR		
13. <input type="checkbox"/> YES <input type="checkbox"/> NO			33. <input type="checkbox"/> YES <input type="checkbox"/> NO		
FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)			FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)		
14.			34.		
MOTHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)			MOTHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)		
15.			35.		
FATHER/PARENT BIRTHPLACE (State or Foreign Country)		MOTHER/PARENT BIRTHPLACE (State or Foreign Country)	FATHER/PARENT BIRTHPLACE (State or Foreign Country)		MOTHER/PARENT BIRTHPLACE (State or Foreign Country)
16.		17.	36.		37.
NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	20a. IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. <input type="checkbox"/> MARRIAGE 2. <input type="checkbox"/> CIVIL UNION	NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	40a. IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. <input type="checkbox"/> MARRIAGE 2. <input type="checkbox"/> CIVIL UNION
18.	19.		38.	39.	
20b. LAST RELATIONSHIP ENDED BY: 1. <input type="checkbox"/> DEATH 2. <input type="checkbox"/> DISSOLUTION 3. <input type="checkbox"/> ANNULMENT 4. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER			40b. LAST RELATIONSHIP ENDED BY: 1. <input type="checkbox"/> DEATH 2. <input type="checkbox"/> DISSOLUTION 3. <input type="checkbox"/> ANNULMENT 4. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER		
LICENSE					
We, the above named in this marriage license sincerely affirm and declare that the statements herein made are true.					
SIGNATURE OF SPOUSE ONE			SIGNATURE OF REGISTRAR		THIS DAY OF (Month, Day, Year)
41.			42.		43.
SIGNATURE OF SPOUSE TWO			SIGNATURE OF REGISTRAR		THIS DAY OF (Month, Day, Year)
44.			45.		46.
Registrar of Vital Records					
This license certifies that the above-named persons have complied with the laws of Connecticut relating to a marriage license, and any person authorized to celebrate a marriage may join the above-named in marriage in the town of:					THIS LICENSE MUST BE USED ON OR BEFORE DATE (Month, Day, Year)
47.					48.
ISSUING OFFICIAL (Signature)			TITLE	DATE ISSUED (Month, Day, Year)	
49.			50.	51.	
OFFICIATOR					
I HEREBY CERTIFY THAT			AND		
52.			53.		
THE ABOVE NAMED PARTIES WERE LEGALLY JOINED IN MARRIAGE BY ME IN THE TOWN OF			IN THE COUNTY OF		THIS DAY (Month, Day, Year)
54.			55.		56.
SIGNATURE OF PERSON PERFORMING CEREMONY		PERSON PERFORMING CEREMONY (Please Print)	OFFICIAL CAPACITY		TYPE OF CEREMONY
57.		58.	59.		60.
REGISTRAR					
THIS CERTIFICATE RECEIVED FOR RECORD ON DATE: (Month, Day, Year)			BY (Signature)		
61.			62.		
ADMINISTRATIVE					
SOCIAL SECURITY NUMBER - SPOUSE ONE			SOCIAL SECURITY NUMBER - SPOUSE TWO		
63.			64.		