

**PUBLIC**  
**APPLICATION FOR MARRIAGE LICENSE**

*(PLEASE PRINT)*

<b>Groom</b>		<b>Bride</b>	
First Name:		First Name:	
Middle Name:		Middle Name:	
Last Name:		Current Last Name:	
Date of Birth:		Maiden Last Name: (if different than current)	
State or Country of Birth:		Date of Birth:	
Number of Previous Marriages:		State or Country of Birth:	
Last Marriage Ended By: <input type="checkbox"/> Death <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment		Number of Previous Marriages:	
Date Last Marriage Ended:		Last Marriage Ended By: <input type="checkbox"/> Death <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment	
Occupation:		Date Last Marriage Ended:	
Type of Business:		Occupation:	
Number of Years of Education:		Type of Business:	
Father's Full Name:		Number of Years of Education:	
State or Country of Birth:		Father's Full Name:	
Mother's Full Name (maiden):		State or Country of Birth:	
State or Country of Birth:		Mother's Full Name (maiden):	
Groom's Street Address:		State or Country of Birth:	
City:		Bride's Street Address:	
Zip:		City:	
County:		Zip:	
Mailing Address (if different):		County:	
City:		Mailing Address (if different):	
Zip:		City:	
County:		Zip:	
Bride or Groom's Daytime Phone Number:		County:	
<b>CALIFORNIA</b>	<b>WITHIN 90 DAYS</b>	<b>CEREMONY HERE</b>	