

APPLICATION FOR MARRIAGE LICENSE

A P P L I C A N T 1	NAME (FIRST) (MIDDLE) (LAST) (SUFFIX)				NUMBER OF PREVIOUS MARRIAGES	
	ADDRESS			PHONE NUMBER	HOW LAST MARRIAGE TERMINATED DEATH ___ DIVORCE ___ ANNUL ___	
	CITY		COUNTY	STATE ZIP	DATE TERMINATED	
	AGE	SEX	BIRTHDATE	BIRTHPLACE	RACE	COUNTY/STATE OF TERMINATION
	PREVIOUS MARRIED NAME			S.S.N.	COURT WHERE TERMINATED	

A P P L I C A N T 2	NAME (FIRST) (MIDDLE) (LAST)				NUMBER OF PREVIOUS MARRIAGES	
	ADDRESS			PHONE NUMBER	HOW LAST MARRIAGE TERMINATED DEATH ___ DIVORCE ___ ANNUL ___	
	CITY		COUNTY	STATE ZIP	DATE TERMINATED	
	AGE	SEX	BIRTHDATE	BIRTHPLACE	RACE	COUNTY/STATE OF TERMINATION
	PREVIOUS MARRIED NAME			S.S.N.	COURT WHERE TERMINATED	

If Applicant 1 is under 18 years of age, give the name and address of parents or guardian.	Name Address
If Applicant 2 is under 18 years of age, give the name and address of parents or guardian.	Name Address
Are the parties related to each other by blood or adoption? No ___ Yes ___	If Yes, what relationship?
Give the names the parties will have after the marriage Applicant 1 Applicant 2	First Middle Last Suffix
Give the address the parties will have after the marriage	Number & Street City State Zip
Does one or both of the parties have a felony conviction for a crime committed on or after August 1, 2000 under MN law or the law of another state or federal jurisdiction?	Applicant 1 NO ___ YES ___ If YES, jurisdiction: Applicant 2 NO ___ YES ___ If YES, jurisdiction:

Notice: A party who has a felony conviction for a crime committed on or after August 1, 2000 under MN law or the law of another state or federal jurisdiction may not use a different name after marriage except as authorized by MN statute 259.13, and doing so is a gross misdemeanor.

Have the parties received 12 hours of marriage counseling to receive the reduced marriage fee? NO ___ YES ___
