



COUNTY CLERK'S OFFICE USE ONLY:

TELEPHONE NO.: _____

DIVORCE DATE/Applicant #1 (if applicable) _____

DIVORCE DATE/Applicant #2 (if applicable) _____

LICENSE NO. _____

WEDDING DATE: _____

MAIL _____ PICKUP _____

MEDIA RELEASE Y N

NEWAYGO COUNTY MARRIAGE LICENSE APPLICANT INFORMATION

APPLICANT #1

APPLICANT #2

Full Name of Male Female (First, Middle, Last)

Full Name of Male Female (First, Middle, Last)

Surname on Birth Certificate, if Different

Surname on Birth Certificate, if Different

Date of Birth

Date of Birth

Birthplace (City, State)

Birthplace (City, State)

Residence Address - Street

Residence Address - Street

City State Zip Code

City State Zip Code

Residence County Times Previously Married

Residence County Times Previously Married

Full Name of 1st Parent

Full Name of 1st Parent

1st Parent Surname (Maiden Name if Applicable) 1st Parent Birthplace

1st Parent Surname (Maiden Name if Applicable) 1st Parent Birthplace

Full Name of 2nd Parent

Full Name of 2nd Parent

2nd Parent Surname 2nd Parent Birthplace

2nd Parent Surname 2nd Parent Birthplace

Social Security Number

Social Security Number

COUNTY CLERK'S OFFICE USE ONLY:

IDENTIFICATION:

BIRTH CERTIFICATE: _____

DRIVER'S LICENSE: _____

OTHER: _____

SPECIAL NOTES: _____
