

NOTICE OF INTENT TO WED APPLICATION

SPOUSE 1

Full Name:

Street Address:

City:

State: Zip Code:

County You Live In:

Date of Birth:

Father's Last Name (Optional) Father's First Name (Optional)

Mother's Maiden Name (Optional) Mothers's First Name (Optional)

Phone Number:

SPOUSE 2

Full Name:

Street Address:

City:

State: ZIP CODE:

County You Live In:

Date of Birth:

Father's Last Name (Optional): Father's First Name (Optional)

Mother's Maiden Name (Optional): Mother's First Name (Optional):

Phone Number: