

**IN THE COMMON PLEAS COURT OF FAIRFIELD COUNTY, OHIO
MARRIAGE APPLICATION**

Please verify the accuracy of all information. This application cannot be changed once it is submitted. If you have any questions, please ask.

APPLICANT 2

Date of Application: _____

Marriage License: _____

PERSONAL INFORMATION

Last Name:		First Name:		MI:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:		City:	State:	Zip:	County:
SSN:		DOB:	AGE:	Home Phone:	
City of Birth			State of Birth		
Address After Marriage:		City:	State:	Zip:	
First Name of Parent 1 (Maiden Name if Applicable):		MI:	Last Name Parent 1:		<input type="checkbox"/> Male <input type="checkbox"/> Female
Parent's Address:		City:	State:	Zip:	
Last Name of Parent 2 (Maiden Name if Applicable):		MI:	First Name Parent 1:		<input type="checkbox"/> Male <input type="checkbox"/> Female
Parent's Address <i>if different than Parent 1</i> :		City:	State:	Zip:	
Your Occupation:			Work Phone:		
Employer:					

MARRIAGE

1st Spouse – First & Last Name at Time of Marriage		<input type="checkbox"/> Deceased Date:	<input type="checkbox"/> Divorced Date:
Names & Ages of Minor Children by this Marriage:			
2nd Spouse – First & Last Name at Time of Marriage		<input type="checkbox"/> Deceased Date:	<input type="checkbox"/> Divorced Date:
Names & Ages of Minor Children by this Marriage:			
3rd Spouse – First & Last Name at Time of Marriage		<input type="checkbox"/> Deceased Date:	<input type="checkbox"/> Divorced Date:
Names & Ages of Minor Children by this Marriage:			

PERSON OFFICIATING CEREMONY

First Name:		Last Name:		Title:	
Address:		City:	State:	Zip:	
Place of Ceremony:		Date of Ceremony:		Phone No.:	