



Marriage License Application

SHARON R. BOCK

Clerk & Comptroller
Palm Beach County

INSTRUCTIONS

Please provide the information requested below to assist us in processing your marriage license. Please be prepared to present proper identification and the applicable marriage license fee. Payable by Cash, Check, MasterCard or Visa. The Clerk can perform your ceremony here in the office on or after the effective date for a fee of \$30.00.

GENERAL INFORMATION - Groom

Last Name:		First Name:		Middle:	
Date of Birth:	Day / Mon / Year	Social Security Number: (Req. by Sec. 7.41.04 F.S., as revised by Chapter 97-170)			
Street Address:					
City:		State:		Zip:	
County:		Phone Number:	()		
Previously Married:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of marriage(s): (including this one)		Last Marriage Ended by:	Last Marriage Ended on:
			<input type="checkbox"/> Death <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment	Day / Mon / Year	
Race:		Birthplace: (State or Country)			

GENERAL INFORMATION - Bride

Last Name:		First Name:		Middle:	
Maiden Name:					
Date of Birth:	Day / Mon / Year	Social Security Number: (Req. by Sec. 7.41.04 F.S., as revised by Chapter 97-170)			
Street Address:					
City:		State:		Zip:	
County:		Phone Number:	()		
Previously Married:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of marriage(s): (including this one)		Last Marriage Ended by:	Last Marriage Ended on:
			<input type="checkbox"/> Death <input type="checkbox"/> Divorce <input type="checkbox"/> Annulment	Day / Mon / Year	
Race:		Birthplace: (State or Country)			



Statement of Bride and Groom

SHARON R. BOCK

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We, _____ and _____
attest that we have , or have not , separately , or together , completed a
marital preparation course. We also have _____ read the handbook, or otherwise
accessed the information via other media (electronic) presentation, of the rights and
responsibilities of parties to a marriage, that are specified in s. 741.0306.

Groom's Signature:

Bride's Signature:

Sworn to and subscribed before me on the _____ day of _____, _____

(Seal)

Signature of Deputy Clerk:

Print Name of Deputy Clerk:
