

APPLICATION FOR MARRIAGE LICENSE

Date of Marriage: _____

Place of Marriage: _____

MALE

FEMALE

(First) (Middle) (Last)	Name of Applicant	(First) (Middle) (Last)
(Day) (Month) (Year) (Age)	Date of Birth/Age	(Day) (Month) (Year) (Age)
(City/Municipality) (Province)	Place of Birth	(City/Municipality) (Province)
	Sex (Male or Female)	
	Citizenship	
	Residence	
	Religion	
	Civil Status	
	IF PREVIOUSLY MARRIED: How was it dissolved	
(City/Municipality) (Province)	Place where dissolved	(City/Municipality) (Province)
(Day) (Month) (Year)	Date when dissolved	(Day) (Month) (Year)
	Degree of Relationship of contracting parties	
(First) (Middle) (Last)	Name of Father	(First) (Middle) (Last)
	Citizenship	
	Residence	
(First) (Middle) (Last)	Name of Mother	(First) (Middle) (Last)
	Citizenship	
	Residence	
(First) (Middle) (Last)	Persons who gave consent or advice	(First) (Middle) (Last)
	Relationship	
	Citizenship	
	Residence	
_____ (Signature of applicant)		_____ (Signature of applicant)