

**GROOM OR APPLICANT 1 INFORMATION FOR MARRIAGE APPLICATION**

**\*\*\* PLEASE PRINT \*\*\***

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN NAME)

RESIDENCE \_\_\_\_\_  
(ADDRESS) (CITY) (STATE) (ZIP CODE) (COUNTY)

DATE OF BIRTH \_\_\_\_\_ RACE \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(MM/DD/YYYY)

PLACE OF BIRTH \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
(STATE/COUNTRY) (CIRCLE ONE) HOME CELL WORK

DL# \_\_\_\_\_

NUMBER OF THIS MARRIAGE \_\_\_\_\_

DATE LAST MARRIAGE ENDED \_\_\_\_\_  
(MM/DD/YYYY)

LAST MARRIAGE ENDED: (CIRCLE ONE) DEATH DIVORCE or ANNULMENT

**BRIDE OR APPLICANT 2 INFORMATION FOR MARRIAGE APPLICATION**

**\*\*\* PLEASE PRINT \*\*\***

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) (MAIDEN NAME)

RESIDENCE \_\_\_\_\_  
(ADDRESS) (CITY) (STATE) (ZIP CODE) (COUNTY)

DATE OF BIRTH \_\_\_\_\_ RACE \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(MM/DD/YYYY)

PLACE OF BIRTH \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
(STATE/COUNTRY) (CIRCLE ONE) HOME CELL WORK

DL# \_\_\_\_\_

NUMBER OF THIS MARRIAGE \_\_\_\_\_

DATE LAST MARRIAGE ENDED \_\_\_\_\_  
(MM/DD/YYYY)

LAST MARRIAGE ENDED: (CIRCLE ONE) DEATH DIVORCE or ANNULMENT

# REQUIRED PREMARITAL STATEMENT

FLORIDA STATUTE SECTION 741.04

We, the undersigned, hereby state:

(Check the appropriate statements)

1.  I, the **Groom or Applicant 1**, have completed a premarital preparation course.  
 I, the **Bride or Applicant 2**, have completed a premarital preparation course.  
 We, the Groom or Applicant 1 and Bride or Applicant 2 together, have completed a premarital preparation course.  
 We, the Groom or Applicant 1 and Bride or Applicant 2, have **not** completed a premarital course.
2.  We have both obtained and read or otherwise accessed the information contained in the handbook or other electronic media presentation of the rights and responsibilities of parties to a marriage.  
 We have **not** obtained and read or otherwise accessed the information contained in the handbook or other electronic media presentation of the rights and responsibilities of parties to a marriage.
3.  We do have children in common born in the state of Florida. (COMPLETE DH 743A 6-10 FORM)  
 We do **not** have children in common born in the state of Florida.

**DO NOT SIGN UNTIL INSTRUCTED TO DO SO**

\_\_\_\_\_  
Groom or Applicant 1 Signature

\_\_\_\_\_  
Bride or Applicant 2 Signature

\_\_\_\_\_  
Print Groom or Applicant 1 Name

\_\_\_\_\_  
Print Bride or Applicant 2 Name

Subscribed and sworn to before me on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Deputy Clerk

\_\_\_\_\_  
**YES, I would like to purchase a commemorative marriage license (\$15.00 each).**

\_\_\_\_\_  
**No, I would not like to purchase a commemorative marriage license.**