

Marriage License Application

* The fee for a Marriage License is \$57.00, unless you present a pre-marital counseling letter when applying. The letter must state you received pre-marital counseling, if you present this with the application, you will receive a \$20 discount. We accept cash or check only at this time! *

* Return this completed form with a copy of your valid driver's license/photo ID. *

* Email form to: hbailey@hampshirewv.com *

* Once we receive this completed form and copy of your valid driver's license/photo ID, we will contact you to set up an appointment to complete the rest of the process. *

* If you have any questions, please call our office at (304) 822 – 5112. *

Marriage Date: _____
Location of Marriage: _____
Officiants Name: _____
Officiants Number: _____
Groom's Number: _____
Bride's Number: _____
Groom's Email: _____
Bride's Email: _____
Groom's Mailing Address: _____
Bride's Mailing Address: _____

Groom's Information

Groom's Name: (First, Middle, Last, Suffix)

Birth Surname: (if different)

SSN:

Birth Date:

Evidence of Age: (Driver's License, Birth Certificate)

Birth City, State:

Relationship to Bride: (If you are not related, put None; If you are related, specify how)

Sex:

Race:

School Years: (0-12)

College: (1-4 or 5+)

of this Marriage: (First, Second, etc.)

Previous Status: (Death, Divorce, Dissolution, or Annulment)

Previous Date:

Address:

City:

State:

Zip:

Phone #:

Mother's Name: (First, Middle, Maiden Surname)

Mother's Birth City, State:

Father's Name: (First, Middle, Last)

Bride's Information

Bride's Name: (First, Middle, Last, Suffix)

Birth Surname: (if different)

SSN:

Birth Date:

Evidence of Age: (Driver's License, Birth Certificate)

Birth City, State:

Relationship to Groom: (If you are not related, put None; If you are related, specify how)

Sex:

Race:

School Years: (0-12)

College: (1-4 or 5+)

of this Marriage: (First, Second, etc.)

Previous Status: (Death, Divorce, Dissolution, or Annulment)

Previous Date:

Address:

City:

State:

Zip:

Phone #:

Mother's Name: (First, Middle, Maiden Surname)

Mother's Birth City, State:

Father's Name: (First, Middle, Last)