



Marriage License Information Worksheet



Date of Wedding: _____

Grooms Information:

Last Name First Name Middle Name Title

Mailing Address after marriage: _____
Address City State Zip

Are you in the city limits: yes no Parish _____

Social Security #: _____ Daytime Telephone #: _____

Race _____ Number of Marriages: 1st 2nd 3rd other _____

Highest Level of Education: _____
(Number of years) elementary high school college

Fathers Name _____ State of Birth _____

Mothers Maiden Name _____ State of Birth _____

Brides Information:

Last Name First Name Middle Name Title

Mailing Address after marriage: _____
Address City State Zip

Are you in the city limits: yes no Parish _____

Social Security #: _____ Daytime Telephone #: _____

Race _____ Number of Marriages: 1st 2nd 3rd other _____

Highest Level of Education: _____
(Number of years) elementary high school college

Fathers Name _____ State of Birth _____

Mothers Maiden Name _____ State of Birth _____

Are the two of you related in any way? yes no

Are you entering into the State of Louisiana's "Covenant Marriage"? yes no