

**TOWN OF SHERMAN
MARRIAGE LICENSE WORKSHEET**

GROOM/SPOUSE					BRIDE/SPOUSE									
NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)					
SEX	DATE OF BIRTH (Mo., Day, Year)		AGE		SEX	DATE OF BIRTH (Mo., Day, Year)		AGE		SEX	DATE OF BIRTH (Mo., Day, Year)		AGE	
BIRTHPLACE (State or Foreign Country)			EDUCATION (No. Yrs. Completed)			BIRTHPLACE (State or Foreign Country)			EDUCATION (No. Yrs. Completed)					
			GRADES 1-8	GRADES 9-12	COLLEGE 1-5+				GRADES 1-8	GRADES 9-12	COLLEGE 1-5+			
RESIDENCE (No. and Street)					RESIDENCE (No. and Street)									
CITY OR TOWN		COUNTY		STATE	CITY OR TOWN		COUNTY		STATE					
SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR: YES <input type="checkbox"/> NO <input type="checkbox"/>					SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR: YES <input type="checkbox"/> NO <input type="checkbox"/>									
FATHER'S FULL NAME					FATHER'S FULL NAME									
MOTHER'S FULL MAIDEN NAME					MOTHER'S FULL MAIDEN NAME									
FATHER'S BIRTHPLACE (State or Foreign Country)			MOTHER'S BIRTHPLACE (State or Foreign Country)		FATHER'S BIRTHPLACE (State or Foreign Country)			MOTHER'S BIRTHPLACE (State or Foreign Country)						
NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS: <input type="checkbox"/> MARRIAGE <input type="checkbox"/> CIVIL UNION			NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS: <input type="checkbox"/> MARRIAGE <input type="checkbox"/> CIVIL UNION							
LAST RELATIONSHIP ENDED BY: <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> ANNULMENT <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER					LAST RELATIONSHIP ENDED BY: <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> ANNULMENT <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER									
SOCIAL SECURITY NUMBER OF GROOM/SPOUSE					SOCIAL SECURITY NUMBER OF BRIDE/SPOUSE									

OFFICIATOR'S NAME (First) (Last)
OFFICIATOR'S ADDRESS
ADDRESS WHERE WE CAN SEND A CERTIFIED COPY OF YOUR MARRIAGE LICENSE