

FYI...

Before the big day, get the paperwork out of the way. Make sure to contact the County Clerk from the County in which you reside to get an application for a marriage license. Below is a sample of the form you will need. For more information, contact your County Clerk's office.

Antrim(231) 533-6353
Benzie(231) 882-9671
Charlevoix(231) 547-7200
Grand Traverse ..(231) 922-4760
Cheboygan(231) 627-8808
Crawford(231) 344-3200
Emmet(231) 348-1744
Kalkaska(231) 258-3300
Leelanau(231) 256-9824
Manistee(231) 723-3331
Missaukee(231) 839-4967
Otsego(989) 732-6484
Wexford(231) 779-9450

AFFIDAVIT FOR LICENSE TO MARRY

STATE OF MICHIGAN

No. _____

County of _____

DATTIME PHONE: _____

The Undersigned, being duly sworn, depose(s) and say(s) that:

WEDDING DATE: _____

MALE

FEMALE

FULL NAME OR NAME (MRS. HUSBAND, LAST)		and	FULL NAME OF FEMALE (MRS. HUSBAND, LAST)				
PRESENT ADDRESS	DATE OF BIRTH		PRESENT ADDRESS	DATE OF BIRTH			
RESIDENCE NO.	STREET		RESIDENCE NO.	STREET			
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE		
RESIDENCE COUNTY		TIME PREVIOUSLY MARRIED		RESIDENCE COUNTY		TIME PREVIOUSLY MARRIED	
BIRTHPLACE - CITY AND STATE				BIRTHPLACE - CITY AND STATE			
PARENT'S FULL NAME				PARENT'S FULL NAME			
MOTHER'S FULL NAME BEFORE 1ST MARRIED				WOMEN'S FULL NAME BEFORE 1ST MARRIED			
FATHER'S BIRTHPLACE		MOTHER'S BIRTHPLACE		FATHER'S BIRTHPLACE		MOTHER'S BIRTHPLACE	

I intend to marry and that this affidavit is made for the purpose of obtaining a marriage license; that each of the above-named persons is of the age required by law, is not related to the other within the degree provided by statute and is of sufficient mental capacity to contract marriage; that said persons are acquainted with the laws of the State of Michigan relative to marriage as summarized upon the back of this blank; that there is no legal impediment to said marriage; and that to the best knowledge and belief of the undersigned all of the foregoing statements are true.

Educational materials regarding prenatal care and the transmission and prevention of venereal disease and HIV infection as well as information on the availability of tests for these diseases have been received.

Subscribed and sworn to before me, County Clerk, a Notary Public in and for _____, _____.

County, Michigan, or person duly authorized by law to administer oaths, this _____ day

of _____, 20 _____. _____

Commissioner of _____ County, Michigan, Notary Public

My commission expires _____.