



**Carolyn Templeton , Sumner County Clerk**  
**Marriage License Information or APPLY ON LINE: [www.sumnertags.com](http://www.sumnertags.com)**

**APPLICANT 1** *Please Print entire form. Thank you.* Office Use:

**Please circle: Groom / Bride / Partner**      **Please circle: Male / Female**

	First	Middle	Last	Original Surname	Birth State
Applicant 1's Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Parent 1 Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother / Parent 2 Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address	<input type="text"/>			Social Security No.	<input type="text"/>
City , State, Zip	<input type="text"/>			Race	<input type="text"/>
County	<input type="text"/>				
Phone	<input type="text"/>			What Number Marriage	<input type="text"/>
Email	<input type="text"/>			Ended by (Circle one):	<input type="text" value="Death"/> <input type="text" value="Divorce"/>
Birth Date	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text" value=""/>	Age	<input type="text"/>	Date Ended: (mm/dd/yy)	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text" value=""/>

**RACE**

Hispanic Origin (Check the box that best describes whether the Applicant is Spanish/Hispanic/Latino. Check the "No" box if Applicant 1 is not Spanish/Hispanic/Latino.)

<input type="checkbox"/> No, not Spanish/Hispanic/Latino	<input type="checkbox"/> Yes, Mexican, Mexican American
<input type="checkbox"/> Yes, Puerto Rican	<input type="checkbox"/> Yes, Cuban
<input type="checkbox"/> Yes, other Spanish/Hispanic/Latino	<input type="checkbox"/> Unknown

**EDUCATION**

Applicant 1: Education (Check the box that best describes the highest degree or level of school the Applicant completed.)

<input type="checkbox"/> 8th grade or less	<input type="checkbox"/> 9th - 12th grade, no diploma
<input type="checkbox"/> High school graduate or GED completed	<input type="checkbox"/> Some college credit but no degree
<input type="checkbox"/> Associate degree (e.g. AA, AS)	<input type="checkbox"/> Bachelor's degree (e.g., BA, BS)
<input type="checkbox"/> Master's degree (e.g., MA, MS, MBA)	<input type="checkbox"/> Doctorate (e.g., PhD) or
<input type="checkbox"/> Unknown	Professional degree (e.g., MD, JD)

Mailing Address after you are married:

Office Use:

**Fee \$95.00 or \$35.00 with premarital counseling (requires form)**

**DATE OF MARRIAGE: \_\_\_\_\_ LICENSE VOID AFTER 30 DAYS, INCLUDING TODAY.**

\_\_\_\_\_  
Signature Applicant 1

\_\_\_\_\_  
Signature Applicant 2

**APPLICANT 2** Please Print entire form. Thank you.

**Please circle: Groom / Bride / Partner**      **Please circle: Male / Female**

	First	Middle	Last	Original Surname	Birth State
Applicant 2's Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Parent 1 Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother / Parent 2 Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address	<input type="text"/>			Social Security No.	<input type="text"/>
City, State, Zip	<input type="text"/>			Race	<input type="text"/>
County	<input type="text"/>				
Phone	<input type="text"/>			What Number Marriage	<input type="text"/>
Email	<input type="text"/>			Ended by (Circle one):	<input type="text" value="Death"/> <input type="text" value="Divorce"/>
Birth Date	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>	Age	<input type="text"/>	Date Ended: (mm/dd/yy)	<input type="text" value="/"/> <input type="text" value="/"/> <input type="text"/>

**RACE**

Hispanic Origin (Check the box that best describes whether the Applicant is Spanish/Hispanic/Latino. Check the "No" box if Applicant 2 is not Spanish/Hispanic/Latino.)

- |   |   |
|---|---|
| <input type="checkbox"/> No, not Spanish/Hispanic/Latino    | <input type="checkbox"/> Yes, Mexican, Mexican American |
| <input type="checkbox"/> Yes, Puerto Rican                  | <input type="checkbox"/> Yes, Cuban                     |
| <input type="checkbox"/> Yes, other Spanish/Hispanic/Latino | <input type="checkbox"/> Unknown                        |

**EDUCATION**

Applicant 2: Education (Check the box that best describes the highest degree or level of school the Applicant completed.)

- |  |  |
|--|--|
| <input type="checkbox"/> 8th grade or less                     | <input type="checkbox"/> 9th - 12th grade, no diploma      |
| <input type="checkbox"/> High school graduate or GED completed | <input type="checkbox"/> Some college credit but no degree |
| <input type="checkbox"/> Associate degree (e.g. AA, AS)        | <input type="checkbox"/> Bachelor's degree (e.g., BA, BS)  |
| <input type="checkbox"/> Master's degree (e.g., MA, MS, MBA)   | <input type="checkbox"/> Doctorate (e.g., PhD) or          |
| <input type="checkbox"/> Unknown                               | Professional degree (e.g., MD, JD)                         |