

TOWN OF GREENWICH, CT  
MARRIAGE LICENSE WORKSHEET

DATE APPLIED \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

LICENSE PAID \_\_\_\_\_

DOM \_\_\_\_\_

COPIES PAID \_\_\_\_\_

Picked Up \_\_\_\_\_

Received \_\_\_\_\_

**GROOM / SPOUSE**

**BRIDE / SPOUSE**

NAME (First) (Middle) (Last)					NAME (First) (Middle) (Last)						
SEX	DATE OF BIRTH (Mo, Day, Year)			AGE		SEX	DATE OF BIRTH (Mo, Day, Year)			AGE	
BIRTHPLACE			1-8	9-12	COL	BIRTHPLACE			1-8	9-12	COL
RESIDENCE (No. and Street)					RESIDENCE (No. and Street)						
CITY OR TOWN		COUNTY		STATE	CITY OR TOWN		COUNTY		STATE		
RACE	SUPV/CTRL GUARDIAN/CONSERVATOR				RACE	SUPV/CTRL GUARDIAN/CONSERVATOR					
	YES	NO				YES	NO				
FATHER'S NAME					FATHER'S NAME						
MOTHER'S FULL MAIDEN NAME					MOTHER'S FULL MAIDEN NAME						
FATHER'S BIRTHPLACE			MOTHER'S BIRTHPLACE		FATHER'S BIRTHPLACE			MOTHER'S BIRTHPLACE			
#MARR	#CIVIL UN	IF PREV M/CU LAST REL. WAS			#MARR	#CIVIL UN	IF PREV M/CU LAST REL. WAS				
		MARRIAGE	CIVIL UNION				MARRIAGE	CIVIL UNION			
LAST RELATIONSHIP ENDED BY:					LAST RELATIONSHIP ENDED BY:						
DEATH      DISSOLUTION      ANNULMENT					DEATH      DISSOLUTION      ANNULMENT						
PREV. CIVIL UNION DID NOT END. MARRYING CIVIL UNION PART.					PRE. CIVIL UNION DID NOT END. MARRYING CIVIL UNION PART.						
SOCIAL SECURITY NUMBER					SOCIAL SECURITY NUMBER						

DATE OF MARRIAGE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

PLACE OF CEREMONY \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

PERSON PEFORMING THE CEREMONY \_\_\_\_\_ CAPACITY \_\_\_\_\_