

Application for Marriage License

Parish of Tangipahoa

State of Louisiana

License Number _____

Date of Application _____

Check if consanguineous or adoptive relationship

Time of Application _____

Party A –

Last Name, First Name Middle Name Title/Suffix Name Prior to First Marriage
(if different than current legal last name)

Inside City Limits

Residence Address, City, State Zip Parish/County

Father/ Parent Name Prior to First Marriage: _____ Place of Birth: _____
(City, State, Country)

Mother/ Parent Name Prior to First Marriage: _____ Place of Birth: _____
(City, State, Country)

Highest Level of Education Completed in YEARS: Elementary, High School, College _____ years Race: _____

Social Security Number: _____ Phone Number: (_____) _____

Place of Birth: _____ Date of Birth: _____

Sex: Male Female

Party Type: Groom Bride Spouse

Prior Marriage: Formerly Married? Yes No Reason Last Marriage Ended: Divorce Death Annulment

Number of Previous Marriages: _____ Currently Divorced? Yes No Date Last Marriage Ended (mm/dd/yy): _____

I _____ (print name of groom/bride/spouse) do swear or affirm that the information contained in this application for marriage is true and correct. I further swear or affirm that this is my _____ (1st, 2nd, etc. number) marriage but that I am not currently married to anyone else, and that I am free to marry under the laws of the State of Louisiana. I further understand and acknowledge that giving any false information or false statement in this application for marriage shall constitute the crime of filing a false public record in violation of the Louisiana Criminal Code (R.S. 14:133).

Signature of Party A _____

Sworn to and subscribed before me this _____ day of _____, 20_____.

Signature of Notary Public or Deputy Clerk of Court _____ Notary ID _____

Party B –

Last Name, First Name Middle Name Title/Suffix Name Prior to First Marriage
(if different than current legal last name)

Inside City Limits

Residence Address, City, State Zip Parish/County

Father/ Parent Name Prior to First Marriage: _____ Place of Birth: _____
(City, State, Country)

Mother/ Parent Name Prior to First Marriage: _____ Place of Birth: _____
(City, State, Country)

Highest Level of Education Completed in YEARS: Elementary, High School, College _____ years Race: _____

Social Security Number: _____ Phone Number: (_____) _____

Place of Birth: _____ Date of Birth: _____

Sex: Male Female

Party Type: Groom Bride Spouse

Prior Marriage: Formerly Married? Yes No Reason Last Marriage Ended: Divorce Death Annulment

Number of Previous Marriages: _____ Currently Divorced? Yes No Date Last Marriage Ended (mm/dd/yy): _____

I _____ (print name of groom/bride/spouse) do swear or affirm that the information contained in this application for marriage is true and correct. I further swear or affirm that this is my _____ (1st, 2nd, etc. number) marriage but that I am not currently married to anyone else, and that I am free to marry under the laws of the State of Louisiana. I further understand and acknowledge that giving any false information or false statement in this application for marriage shall constitute the crime of filing a false public record in violation of the Louisiana Criminal Code (R.S. 14:133).

Signature of Party B _____

Sworn to and subscribed before me this _____ day of _____, 20_____.

Signature of Notary Public or Deputy Clerk of Court _____ Notary ID _____

Is this a Covenant Marriage? Yes No (if YES, complete below):

We, _____ and _____ do hereby declare our intent to contract a Covenant Marriage and, accordingly, have executed a declaration of intent attached hereto.