LUANNE GREER
DICKSON COUNTY CLERK

P O BOX 220
CHARLOTTE, TN 37036

MARRIAGE LICENSE INFORMATION

APPLICANT 1 GROOM ☐ BRIDE ☐ PARTNER ☐

Applicant 1's Name _____ First _____ Middle _____ Last _____ Suffix _____ Original Surname _____ Birth State

Father / Parent 1's Name _____ First _____ Middle _____ Last _____ Suffix _____ Original Surname _____ Birth State

Mother / Parent 2's Name _____ First _____ Middle _____ Last _____ Suffix _____ Original Surname _____ Birth State

Applicant 1's Address _____ Street and Number

_____ City _____ State _____ Zip

_____ County

Applicant 1's Email _____

Applicant 1's Phone _____

Applicant 1's Birth Date _____ Age _____

Social Security Number _____

Race _____

Primary Education _____

College, No. Yrs. Completed _____

Marriage Number _____

How Prev. Marriage Ended _____

Date Prev. Marriage Ended _____

Gender _____

Next of Kin _____

Address _____

APPLICANT 2 GROOM ☐ BRIDE ☐ PARTNER ☐

Applicant 2's Name _____ First _____ Middle _____ Last _____ Suffix _____ Original Surname _____ Birth State

Father / Parent 1's Name _____ First _____ Middle _____ Last _____ Suffix _____ Original Surname _____ Birth State

Mother / Parent 2's Name _____ First _____ Middle _____ Last _____ Suffix _____ Original Surname _____ Birth State

Applicant 2's Address _____ Street and Number

_____ City _____ State _____ Zip

_____ County

Applicant 2's Email _____

Applicant 2's Phone _____

Applicant 2's Birth Date _____ Age _____

Social Security Number _____

Race _____

Primary Education _____

College, No. Yrs. Completed _____

Marriage Number _____

How Prev. Marriage Ended _____

Date Prev. Marriage Ended _____

Gender _____

Next of Kin _____

Address _____

Address After Marriage

_____ Street and Number

_____ City _____ State _____ Zip

Judge's Name _____

Date Judge Signed _____

Premarital Counseling

Did both applicants receive premarital counseling? Yes ☐ No ☐

Are both applicants out of state? Yes ☐ No ☐

I hereby certify that the above statements are true

Applicant 1 Signature _____

Applicant 2 Signature _____