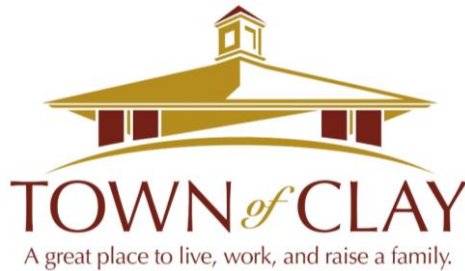


Office of the Town Clerk

Town Clerk
Jill Hageman-Clark

4401 State Route 31
Clay, New York 13041-8707
Website: www.townofclayny.gov



Phone: (315) 652-3800
Fax: (315) 622-7259
E-mail: townclerk@townofclayny.gov

Marriage License Worksheet

Date of Marriage _____, 20____ Ceremony to be performed by _____ Phone # _____

Location where marriage will be performed _____

PERSON 1: **Circle One:** GROOM/BRIDE/SPOUSE (*optional*) **Circle One:** Gender: MALE/FEMALE (*optional*)

Full Name (Last, First, Middle) _____ Social Security # _____ - _____ - _____

Full Birth Name (Last, First, Middle, if different) _____

Full Name *after* Marriage (Last, First, Middle, if different) _____

Mailing Address _____ Phone # _____

State _____ County _____ **Circle One:** CITY/TOWN/VILLAGE, Specify _____

D/O/B: _____ Age _____ Place of Birth _____

Occupation _____ Industry _____

Father/Parent (First, Middle, Last) _____ Country of Birth _____

Mother/Parent (First, Middle, Maiden) _____ Country of Birth _____

Number of **this** Marriage _____ If this is **not** your first marriage, please supply **any and all original or certified copies of divorce papers with filing date stamp from the County it was filed in, or a death certificate.**

PERSON 2: **Circle One:** GROOM/BRIDE/SPOUSE (*optional*) **Circle One:** Gender: MALE/FEMALE (*optional*)

Full Name (Last, First, Middle) _____ Social Security # _____ - _____ - _____

Full Birth Name (Last, First, Middle, if different) _____

Full Name *after* Marriage (Last, First, Middle, if different) _____

Mailing Address _____ Phone # _____

State _____ County _____ **Circle One:** CITY/TOWN/VILLAGE, Specify _____

D/O/B: _____ Age _____ Place of Birth _____

Occupation _____ Industry _____

Father/Parent (First, Middle, Last) _____ Country of Birth _____

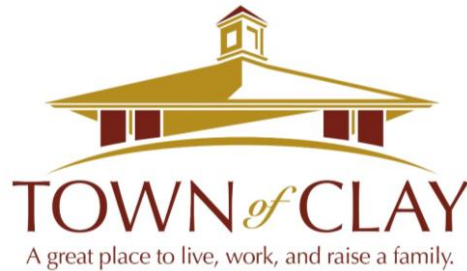
Mother/Parent (First, Middle, Maiden) _____ Country of Birth _____

Number of **this** Marriage _____ If this is **not** your first marriage, please supply **any and all original or certified copies of divorce papers with filing date stamp from the County it was filed in, or a death certificate.**

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Marriage Worksheet Instructions

Office hours are 8:30 A.M. to 4:00 P.M., Monday through Friday, for marriage license applications. *Marriage license applications are not be processed after 4:00 P.M.*

Both parties must be present at the same time, you cannot use the license for 24 hours and is only valid for 60 days.

If this is **not** a first marriage, we require any and all divorce papers with the filing date, and/or a death certificate.

New York State Department of Health requires **one** of the following forms of identification for **each applicant** when applying for a marriage license:

1. Valid Drivers License
2. Valid Non-Drivers I.D.
3. Valid Passport
4. Original Naturalizations Papers
5. Military I.D.
6. Employers Photo I.D.

Both applicants must also provide **one** of the following:

1. Original Birth Certificate (with a raised seal)
2. Original Baptismal Record (with parent's names)

Only the name that appears on the document is acceptable. We cannot Americanize a name. All records issued outside the United States **must** be accompanied by a certified translation.

The fee for a marriage license is **\$40.00**. We accept cash, check or credit card. Checks should be payable to: Jill Hageman-Clark, Town Clerk.