

PERSONAL PARTICULARS	CONTRACTING PARTIES							
	APPLICANT ONE				APPLICANT TWO			
1. FULL NAME (current first, middle and last)								
2. LEGAL NAME AT BIRTH								
3. RESIDENCE STREET ADDRESS								
CITY, STATE AND ZIP CODE								
4. AGE (LAST BIRTHDAY), GENDER DATE OF BIRTH, AND RACE	Age	Gender	Date of Birth	Race	Age	Gender	Date of Birth	Race
5. BIRTHPLACE (city or county, state)								
6. RELATIONSHIP OF PARTIES, <i>if any</i>								
7. DESIGNATED SURNAME (last name after marriage)								
8A. NUMBER OF PRIOR MARRIAGES								
8B. HOW PRIOR MARRIAGE DISSOLVED								
8C. WHEN AND WHERE (year, county, state)								
9. FATHER'S NAME (full name)								
10. FATHER'S BIRTHPLACE (city/state)								
11. MOTHER'S MAIDEN NAME (full name)								
12. MOTHER'S BIRTHPLACE (city/state)								
13. FATHER'S ADDRESS, <i>if under age 18</i>								
14. MOTHER'S ADDRESS, <i>if under age 18</i>								
15. DATE & PLACE OF CONTEMPLATED MARRIAGE (city or county)								
16. PREMARITAL COUNSELING (yes or no)								
17. PHONE NUMBER								

Each of the undersigned applicants hereby certifies that the answers given above are true and correct, that each has received the DPH aids brochure and list of test sites, and that there is no legal impediment to the marriage of the parties.

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

Applicant _____

Applicant _____

Probate Judge/Deputy Clerk/Notary Public

CONSENT OF PARENT OR GUARDIAN

To: The Probate Judge of Cobb County, Georgia

Date: _____

We, the parent(s)/guardian(s) of _____, a female of the age of _____ years, hereby consent(s) to the issuance of a marriage license to her and _____.

Father/Guardian
Address: _____

Witness:

Probate Judge/ Deputy Clerk

Mother/Guardian
Address: _____

Witness:

Probate Judge/ Deputy Clerk

We, the parent(s)/guardian(s) of _____, a male of the age of _____ years, hereby consent(s) to the issuance of a marriage license to him and _____.

Father/Guardian
Address: _____

Witness:

Probate Judge/ Deputy Clerk

Mother/Guardian
Address: _____

Witness:

Probate Judge/ Deputy Clerk

AFFIDAVIT OF MAJORITY

Personally before the undersigned authority came the undersigned affiants(s), who, upon oath, state(s) that the marriage license applicants _____ and _____ are personally known to the affiant(s) and that both applicants are of the age of majority.

Affiant

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

Probate Judge/ Deputy Clerk

Affiant

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

Probate Judge/ Deputy Clerk