

**COMMONWEALTH OF VIRGINIA  
APPLICATION FOR MARRIAGE LICENSE**

VERIFY COPY  
PLEASE REVIEW  
THIS FORM FOR  
ACCURACY

CIRCUIT COURT FOR CITY OR: COUNTY OF <b>SMYTH</b>					CLERK'S NUMBER ---
PARTY A (check one) <input type="checkbox"/> BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/> SPOUSE					
1. FULL NAME (first) *		(middle)		(last) (suffix) MAIDEN SURNAME (if different from last)	
2. SEX <b>M</b>	3. AGE	4. DATE OF BIRTH (Month, Day, Year)	5. PLACE OF BIRTH (state or foreign country) *	6. SOCIAL SECURITY NO. OR DMV NO. <b>XXX-XX-XXXX</b>	
7. RACE *			8. NUMBER OF THIS MARRIAGE (first, second, etc.)	9. MARITAL STATUS (if previously married) <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED	
10. EDUCATION (Specify only highest grade completed)		Elementary or Secondary (0-12) *	College (1-4 or 5+)	11. USUAL RESIDENCE: STREET ADDRESS OR RT. NUMBER *	
11a. CITY OR TOWN OF RESIDENCE *		11b. County (if independent city, leave blank) *		11c. STATE (OR FOREIGN COUNTRY)	
12. NAME OF PARENT (first, middle, last, suffix) (maiden name if any)		12A. SEX	13. NAME OF PARENT (first, middle, last, suffix) (maiden name if any)		13.a SEX
<b>FATHER'S FULL NAME</b>		<b>M</b>	<b>MOTHER'S FULL BIRTH NAME</b>		<b>F</b>
PARTY B (check one) <input type="checkbox"/> BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/> SPOUSE					
14. FULL NAME (first) *		(middle)		(last) (suffix) MAIDEN SURNAME (if different from last)	
15. SEX <b>F</b>	16. AGE	17. DATE OF BIRTH (Month, Day, Year)	18. PLACE OF BIRTH (state or foreign country) *	19. SOCIAL SECURITY NO. OR DMV NO. <b>XXX-XX-XXXX</b>	
20. RACE *			21. NUMBER OF THIS MARRIAGE (first, second, etc.)	22. MARITAL STATUS (if previously married) <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED	
23. EDUCATION (Specify only highest grade completed)		Elementary or Secondary (0-12) *	College (1-4 or 5+)	24. USUAL RESIDENCE: STREET ADDRESS OR RT. NUMBER *	
24a. CITY OR TOWN OF RESIDENCE *		24b. County (if independent city, leave blank) *		24c. STATE (OR FOREIGN COUNTRY)	
25. NAME OF PARENT (first, middle, last, suffix) (maiden name if any)		25a. SEX	26. NAME OF PARENT (first, middle, last, suffix) (maiden name if any)		26a. SEX
<b>FATHER'S FULL NAME</b>		<b>M</b>	<b>MOTHER'S FULL BIRTH NAME</b>		<b>F</b>

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