

**State of Connecticut**

10/08 This form  
may be reproduced  
by the local registrar's  
office

**Department of Public Health**  
**MARRIAGE LICENSE WORKSHEET**  
**For WINDSOR, CT**

**You must apply for  
your marriage license  
in the city/town where  
the ceremony will  
occur.**

**BRIDE/ GROOM/ SPOUSE**

**BRIDE/ GROOM/ SPOUSE**

NAME (First) (Middle) (Last)				NAME (First) (Middle) (Last)			
SEX	DATE OF BIRTH (Mo., Day, Year)		AGE	SEX	DATE OF BIRTH (Mo., Day, Year)		AGE
BIRTHPLACE			EDUCATION (No. Yrs. Completed)	BIRTHPLACE			EDUCATION (No. Yrs. Completed)
			GRADES 1-8	GRADES 9-12	COLLEGE (1-5+)		GRADE S 1-8
RESIDENCE (No. and Street)				RESIDENCE (No. and Street)			
CITY OR TOWN		COUNTY	STATE	CITY OR TOWN		COUNTY	STATE
RACE	SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO			RACE	SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO		
FATHER'S NAME				FATHER'S NAME			
FATHER'S BIRTHPLACE (State or Foreign Country)		MOTHER'S BIRTHPLACE (State or Foreign Country)		FATHER'S BIRTHPLACE (State or Foreign Country)		MOTHER'S BIRTHPLACE (State or Foreign Country)	
MOTHER'S FIRST, MIDDLE & MAIDEN NAME				MOTHER'S FIRST, MIDDLE & MAIDEN NAME			
NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. <input type="checkbox"/> MARRIAGE 2. <input type="checkbox"/> CIVIL UNION		NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. <input type="checkbox"/> MARRIAGE 2. <input type="checkbox"/> CIVIL UNION	
LAST RELATIONSHIP ENDED BY: 1. <input type="checkbox"/> DEATH 2. <input type="checkbox"/> DISSOLUTION 3. <input type="checkbox"/> ANNULMENT 4. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER				LAST RELATIONSHIP ENDED BY: 1. <input type="checkbox"/> DEATH 2. <input type="checkbox"/> DISSOLUTION 3. <input type="checkbox"/> ANNULMENT 4. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER			
SOCIAL SECURITY # OF BRIDE/GROOM/SPOUSE				SOCIAL SECURITY # OF BRIDE/GROOM/SPOUSE			
Phone number for the couple after marriage:							
OFFICIATOR'S NAME (FIRST)		(LAST)		(TITLE – J.P., MINISTER, CLERGYMAN, ETC.)			
OFFICIATOR'S ADDRESS				OFFICIATOR'S PHONE NUMBER			
TOWN WHERE MARRIAGE CEREMONY WILL BE PERFORMED:				DATE OF CEREMONY			