

Jamaican Marriage License Application Form

Groom's Information:

First Name: _____

Middle Name: _____

Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip Code: _____

Date Of Birth: _____

Marital Status: Divorced Widowed Annulment

Last Date Of Marriage: _____

Occupation: _____

Father's Name: _____

Mother's Name: _____

Intended Wedding Date in Jamaica: _____

Bride's Information:

First Name: _____

Middle Name: _____

Last Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip Code: _____

Date OF Birth: _____