

MARRIAGE LICENSE INFORMATION

CGS 46b-24a Marriage licenses must be secured from the town of occurrence. For all Weston marriages the couple must come in person to the Weston Town Clerk. If the couple cannot come in together we can take the oath separately as long as each party appears in person.

The marriage license is valid for 65 days. Should the license expire you will need to apply for a new one. The cost of the license is \$30.00 and an additional \$20.00 for a certified true copy.

Only the Officiator may return the license to the Town Clerk. Once received the Town Clerk (Registrar of Vital Statistics) will certify the license and issue a certified copy to the couple if one was requested.

All vital records in Connecticut are available from the town of occurrence and the Connecticut town of residence (allow 30 days to file to resident towns)

See Marriage License Worksheet Below



TOWN OF WESTON

MARRIAGE LICENSE WORKSHEET

GROOM/		BRIDE/	
NAME (First)	(Middle)	(Last)	(Last)
SEX	DATE OF BIRTH (Mo., Day, Year)	AGE	AGE
BIRTHPLACE	EDUCATION (No. Yrs. Completed) GRADES 1-8	COLLEGE (1-5*)	EDUCATION (No. Yrs. Completed) GRADES 9-12
RESIDENCE	ZIP CODE	ZIP CODE	COLLEGE (1-5*)
CITY OR TOWN	COUNTY	STATE	CITY OR TOWN
RACE	SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO		SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO
FATHER'S FULL NAME			FATHER'S FULL NAME
FATHER'S BIRTHPLACE	MOTHER'S BIRTHPLACE		FATHER'S BIRTHPLACE
MOTHER'S FULL MAIDEN NAME			MOTHER'S FULL MAIDEN NAME
NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS <input type="checkbox"/> MARRIAGE <input type="checkbox"/> CIVIL UNION	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS <input type="checkbox"/> MARRIAGE <input type="checkbox"/> CIVIL UNION
LAST RELATIONSHIP ENDED BY: <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> ANNULMENT		LAST RELATIONSHIP ENDED BY: <input type="checkbox"/> DEATH <input type="checkbox"/> DISSOLUTION <input type="checkbox"/> ANNULMENT	
<input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER		<input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER	

Date of Marriage _____

Officiator's Name _____

Officiator's Tel _____

Please mail my certifies copy(ies) to the following address: _____

PAYABLE BY CHECK OR CASH ONLY

License \$ 30.00

Cert Copies \$20. ea \$ _____

Total \$ _____