

MESKWAKI TRIBAL COURT - APPLICATION FOR MARRIAGE LICENSE, with \$35.00 Filing Fee

Anticipated Date of Marriage: _____ Anticipated location of Marriage: _____

GROOM'S INFORMATION

LEGAL NAME BEFORE MARRIAGE:

(First) (Middle) (Last)

LEGAL NAME AFTER MARRIAGE:

(First) (Middle) (Last)

RESIDENCE ADDRESS AT TIME OF APPLICATION:

(Street address & City) (Settlement/Reservation/State)

TRIBE OF ENROLLMENT (IF APPLICABLE):

DATE OF BIRTH: _____
(Month) (Day) (Year)

SETTLEMENT, RESERVATION, STATE, COUNTRY OF BIRTH: _____

FATHER'S NAME:

(First) (Middle) (Last)

MOTHER'S NAME:

(First) (Middle) (Last)

Groom's Identification Verified by Clerk
(Attach copy of Photo ID)

ID Type: _____

Issued By: _____

Expiration (if any): _____

ID or Member #: _____

I, _____, declare to the Sac & Fox Tribe of the Mississippi in Iowa Clerk of Court, under penalty of perjury, that:

- a) I have accurately completed this application for marriage;
b) I am a male, mentally competent, sober, a citizen of the United States, and not currently married;
c) I am not related by blood as parent or by whole or half-blood in the form of sibling, uncle, nephew, or first cousin to the person I am applying to marry; and,
d) I understand that my receipt for a license to marry does not result in marriage. To become married I must receive a license to marry from the Court Clerk and complete a marriage ceremony or solemnization of marriage.

Applicant Date

If Applicant is under 18 years of age:

We/I the undersigned, being the only person(s) with joint/sole legal custody of the minor, hereby approve of this application for a marriage license and consent to the issuance of such license.

Signature: _____

Printed Name: _____

Signature: _____

Printed Name: _____

The information above was provided to and verified by the Tribal Clerk or designee
On this ____ day of _____, 20 ____
Signature of Designee

FOR TRIBAL COURT CLERK USE ONLY:

Application Fee received: \$ _____ Receipt # _____ Date License Issued: _____ Application #M-APP-20____ - _____

MESKWAKI TRIBAL COURT - APPLICATION FOR MARRIAGE LICENSE, with \$35.00 Filing Fee

Anticipated Date of Marriage: _____ Anticipated location of Marriage: _____

BRIDE'S INFORMATION

LEGAL NAME BEFORE MARRIAGE:

(First) (Middle) (Last)

LEGAL NAME AFTER MARRIAGE:

(First) (Middle) (Last)

RESIDENCE ADDRESS AT TIME OF APPLICATION:

(Street address & City) (Settlement/Reservation/State)

TRIBE OF ENROLLMENT (IF APPLICABLE):

DATE OF BIRTH: _____
(Month) (Day) (Year)

SETTLEMENT, RESERVATION, STATE, COUNTRY OF BIRTH: _____

FATHER'S NAME:

(First) (Middle) (Last)

MOTHER'S NAME:

(First) (Middle) (Last)

Bride's Identification Verified by Clerk

(Attach copy of Photo ID)

ID Type: _____
Issued By: _____
Expiration (if any): _____
ID or Member #: _____

I, _____, declare to the Sac & Fox Tribe of the Mississippi in Iowa Clerk of Court, under penalty of perjury, that:

- a) I have accurately completed this application for marriage;
- b) I am a female, mentally competent, sober, a citizen of the United States, and not currently married;
- c) I am not related by blood as parent or by whole or half-blood in the form of sibling, aunt, niece, or first cousin to the person I am applying to marry; and,
- d) I understand that my receipt for a license to marry does not result in marriage. To become married I must receive a license to marry from the Court Clerk and complete a marriage ceremony or solemnization of marriage.

Applicant Date

If Applicant is under 18 years of age:

We/I the undersigned, being the only person(s) with joint/sole legal custody of the minor, hereby approve of this application for a marriage license and consent to the issuance of such license.

Signature: _____
Printed Name: _____
Signature: _____
Printed Name: _____

*The information above was provided to and verified by the Tribal Clerk or designee
On this _____ day of _____, 20____

Signature of Designee*

FOR TRIBAL COURT CLERK USE ONLY:

Application Fee received: \$ _____ Receipt # _____ Date License Issued: _____ Application #M-APP-20____ - _____