

# Marriage Request Form

## Applicant Information:

Name & Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

## Marriage Information:

Name of Groom & Bride: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_

Number of Copies: \_\_\_\_\_

Intended use of Certificate: \_\_\_\_\_

*\*Request must include a photocopy of a current identification\**

Signature of Applicant: \_\_\_\_\_

Mail Request to:

**Randolph County Clerk  
#1 Taylor Street Room 202  
Chester, IL 62233  
(618)826-5000 x191**