

**CERTIFICATE OF CONSENT FOR MARRIAGE**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

BE IT KNOWN THAT WE (I) THE PARENT(S) OF \_\_\_\_\_  
WHO IS \_\_\_\_\_ YEARS OF AGE, DO HEREBY GIVE OUR (MY) CONSENT TO HIS/HER MARRIAGE  
TO \_\_\_\_\_.

BOTH PARENTS MUST SIGN CONSENT FORM, UNLESS THEY ARE DIVORCED AND ONLY PARENT WAS  
GIVEN CUSTODY OF THE MINOR BY A COURT ORDER (CUSTODY PAPERS MUST BE SHOWN TO  
NOTARY OR DEPUTY CLERK). IF ONE PARENT IS DECEASED THIS AFFIDAVIT MUST SO STATE. PLEASE  
INDICATE BELOW.

DIVORCED - GRANTED FULL CUSTODY \_\_\_\_\_ YES \_\_\_\_\_ NO

DECEASED \_\_\_\_\_ YES \_\_\_\_\_ NO

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_ DAY OF \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
NOTARY PUBLIC OR DEPUTY CLERK  
(seal)

NOTARY PUBLIC - COMMISSION EXPIRATION DATE \_\_\_\_\_