

Town of Arcadia
Town Clerks Office

Marriage Worksheet
For office use only

*It is preferred the couple come in before 3:30pm to ensure a clerk is available to assist with your Marriage License
315-331-1222*

Terresa Vastbinder – Town Clerk

Groom/Bride/Spouse

Full Name (First, Middle, Last) _____ Social Security # _____

Sex (optional) circle one M F Middle Name After Marriage (if no change write no change) _____

Birth Name (if different) _____ Last Name after marriage (if different) _____

Address: State _____ County _____ city _____ town _____ village _____ (check one) Specify _____

Mailing Address _____ Phone # _____

Age _____ DOB ____/____/____ Place of Birth _____

Occupation _____ Industry _____

Father (First, Last) _____ Country of Birth _____

Mother (First, Maiden) _____ Country of Birth _____

Number of this Marriage _____ If this is not your first marriage please supply **any and all original or certified copies of divorce papers with filing date stamp from the county it was filed in, or a death certificate.**

Groom/Bride/Spouse

Full Name (First, Middle, Last) _____ Social Security # _____

Sex (optional) circle one M F Middle Name After Marriage (if no change write no change) _____

Birth Name (if different) _____ Last Name after marriage (if different) _____

Address: State _____ County _____ city _____ town _____ village _____ (check one) Specify _____

Mailing Address _____ Phone # _____

Age _____ DOB ____/____/____ Place of Birth _____

Occupation _____ Industry _____

Father (First, Last) _____ Country of Birth _____

Mother (First, Maiden) _____ Country of Birth _____

Number of this Marriage _____ If this is not your first marriage, please supply **any and all original or certified copies of divorce papers with filing date stamp from the county it was filed in, or a death certificate.**

Information if known at this time.

Date of Marriage _____ Ceremony to be performed by _____ Phone # _____

Place where marriage will be preformed _____

Dawn Piscioti, Supervisor