



IN THE DISTRICT COURT OF WYANDOTTE NATION

Marriage License No: _____

APPLICATION FOR MARRIAGE LICENSE

AFFIDAVIT OF FEMALE APPLICANT

The undersigned states as follows: That I am unmarried and am not related within the third degree of affinity of the male applicant, and further, that I am:

(Check all that apply):

Single Widowed Divorced

An enrolled member of the Wyandotte Nation.

At least eighteen (18) years of age.

Less than eighteen (18) years of age (if checked, female applicant must be pregnant and the Courts of the Wyandotte Nation may authorize the marriage of minors with consent of the parents or legal guardians of the minors. Separate form to be filled out and filed.)

Full Legal Name (First, middle, last): _____

Birthplace: _____

Date of Birth: _____ Age: _____ Sex: _____

Address: _____

Occupation: _____

Father's Name: _____

Father's Birthplace: _____

Mother's Name: _____

Mother's Birthplace: _____

Member of the Wyandotte Nation: Yes No

Legal name to be known after marriage: _____

I swear or affirm under penalty of perjury of the laws of Wyandotte Nation, that I am not disqualified from or incapable of entering into the marriage relation and the statements set forth are true and correct to the best of my knowledge.

Female Applicant

Subscribed and sworn to before me this ____ day of _____, 20__.

Court Clerk/Kristy Fink

Seal

Notary Public

My Commission Expires: _____

AS REQUIRED BY LAW, THE MARRIAGE CERTIFICATE SHALL BE COMPLETED IMMEDIATELY FOLLOWING THE MARRIAGE, AND THE MARRIAGE LICENSE AND CERTIFICATE SHALL BE RETURNED TO THE COURT CLERK WITHIN THIRTY (30) DAYS OF THE ISSUANCE OF THE MARRIAGE LICENSE.

**WYANDOTTE NATION TRIBAL COURT
64700 E. HWY 60
Wyandotte, OK 74370
Tele: 918-678-6342**



IN THE DISTRICT COURT OF WYANDOTTE NATION

Marriage License No: _____

APPLICATION FOR MARRIAGE LICENSE

AFFIDAVIT OF MALE APPLICANT

The undersigned states as follows: That I am unmarried and am not related within the third degree of affinity of the female applicant, and further, that I am:

(Check all that apply):

Single Widowed Divorced

An enrolled member of the Wyandotte Nation.

At least eighteen (18) years of age.

Less than eighteen (18) years of age (if checked, female applicant must be pregnant and the Courts of the Wyandotte Nation may authorize the marriage of minors with consent of the parents or legal guardians of the minors. Separate form to be filled out and filed.)

Full Legal Name (First, middle, last): _____

Birthplace: _____

Date of Birth: _____ Age: _____ Sex: _____

Address: _____

Occupation: _____

Father's Name: _____

Father's Birthplace: _____

Mother's Name: _____

Mother's Birthplace: _____

Member of the Wyandotte Nation: Yes No

Legal name to be known after marriage: _____

I swear or affirm under penalty of perjury of the laws of Wyandotte Nation, that I am not disqualified from or incapable of entering into the marriage relation and the statements set forth are true and correct to the best of my knowledge.

Male Applicant

Subscribed and sworn to before me this ____ day of _____, 20 ____.

Court Clerk/Kristy Fink

Seal

Notary Public

My Commission Expires: _____

AS REQUIRED BY LAW, THE MARRIAGE CERTIFICATE SHALL BE COMPLETED IMMEDIATELY FOLLOWING THE MARRIAGE, AND THE MARRIAGE LICENSE AND CERTIFICATE SHALL BE RETURNED TO THE COURT CLERK WITHIN THIRTY (30) DAYS OF THE ISSUANCE OF THE MARRIAGE LICENSE.

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