

Spokane County Marriage License Application - Supplemental

STATE OF WASHINGTON
SPOKANE COUNTY

Affidavit of Guardian

The undersigned, being first duly sworn, deposes as follows: I am the Parent Legal Guardian of

_____ who is _____ years of age and giving my full

Applicant Name (must print legal name in full)

consent to his/her marriage to _____

Birth Certificate Family Court Waiver Legal Guardianship Documents

Present Address _____
Street Address (no P.O. Boxes) City State Zip

Previous Address (past 6 months) _____
Street Address (no P.O. Boxes) City State Zip

Subscribed to and sworn before me this _____ day

of _____ A.D.

Parent/Guardian Signature

S E A L

Signature

Deputy Auditor Notary Public