

CHEYENNE RIVER SIOUX TRIBE MARRIAGE APPLICATION

GROOM INFORMATION

Form 2506

Groom: _____ Date of Birth: _____ Age: _____
First Name Middle Name Last Name Suffix

Physical Address: _____ Mailing Address: _____
(Street and Number, City/Town, State, Zip Code, County) (PO Box or Street and Number, City/Town, State, Zip Code)

Birth Place: _____ Race: _____ Member of Federally Recognized Tribe? YES _____ NO _____
City/Town State Zip Code County

If Yes, Which Tribe: _____ Phone Number(s): _____

Father's Name: _____ Father's Birth Place: _____

Mother's Name: _____ Mother's Birth Place: _____

Previous Marriage Terminated by: Divorce _____ Widowed _____ Other _____

Name of Previous Spouse: _____

Where Previous Marriage was Dissolved: _____ Date dissolved: _____

BRIDE INFORMATION

Bride: _____ Date of Birth: _____ Age: _____
First Name Middle Name Last Name Suffix

Physical Address: _____ Mailing Address: _____
(Street and Number, City/Town, State, Zip Code, County) (PO Box or Street and Number, City/Town, State, Zip Code)

Birth Place: _____ Race: _____ Member of Federally Recognized Tribe? YES _____ NO _____
City/Town State Zip Code County

If Yes, Which Tribe: _____ Phone Number(s): _____

Father's Name: _____ Father's Birth Place: _____

Mother's Name: _____ Mother's Birth Place: _____

Previous Marriage Terminated by: Divorce _____ Widowed _____ Other _____

Name of Previous Spouse: _____

Where Previous Marriage was Dissolved: _____ Date dissolved: _____

Groom's Signature **Date** **Bride's Signature** **Date**

Subscribed and Sworn to before me this _____ Day of _____, 20_____

Clerk of Courts _____

Date of Marriage

Place of Marriage

Officiant

Religious or Civil Officiant

Permission granted pursuant to C.R.S.T. Law & Order Code, Title VIII: _____

Date: This _____ Day of _____, 20_____

JUDGE