

S & B Professional Services Inc.

Marriage by Proxy

INFORMATION SHEET FOR DOUBLE PROXY MARRIAGE

PLEASE TYPE AND FILL IN ALL LINES

*Please complete all information fully, including **full Middle Names (no initials)***

Date of Application: _____

Spouse 1's Information

Name (First Middle Last): _____

Age: _____

Mother's Maiden Name (First Middle Last):

Father's Name (First Middle Last):

Present or Last Street Address (no P.O. Boxes or APO):

City: _____

State: _____ Zip code: _____

County: _____

Home Phone Number: _____

Cellphone Number: _____

Email Address: _____

Is this Spouse 1's first marriage? *(Circle one)* **Yes** **No**

Is Spouse 1 actively serving in the US Military? **Yes** **No**

Is Spouse 1 a citizen of any country other than the United States? **Yes** **No**

If YES, what country? : _____

Spouse 2's Information

Name (First Middle Last): _____

Age: _____

Mother's Maiden Name (First Middle Last):

Father's Name (First Middle Last):

Present or Last Street Address (no P.O. Boxes or APO):

City: _____

State: _____

Zip code: _____

County: _____

Home Phone Number: _____

Cellphone Number: _____

Email Address: _____

Is this Spouse 2's first marriage? *(Circle one)* **Yes** **No**

Is Spouse 2 actively serving in the US Military? **Yes** **No**

Is Spouse 2 a citizen of any country other than the United States? **Yes** **No**

If YES, what country? : _____

Additional Information

Have Spouse 1 and Spouse 2 met in person? **Yes** **No**

Can Spouse 1 and Spouse 2 complete the forms together in the same location?

Yes **No**

Exact name and complete address where you would like S&B Inc. to send your marriage certificates:

Name: _____

Street Address: _____

City: _____

State: _____

Zip code: _____

Country: _____

How did you hear about our service? (Circle all that apply)

Website

Stars & Stripes

Magazine Referral

If you were referred, please include the name and address of the person who referred you to our company:
