Affidavit for Issuance of Marriage License to One Party
Hospitalized Applicant

If either party is hospitalized within the boundaries of Clark County, an Affidavit for Issuance of Marriage License to One Party is required.

A statement from the applicant’s physician is required, presented on the physician’s letterhead, as to the applicant’s condition and expected recovery date. **The statement must be signed by the attending physician no more than 15 days prior to the date the couple applies for a marriage license.**

This statement must contain the reason why the applicant is unable to be present. **The statement must note that the applicant is alert, cognizant of the environment and able to make his or her own decisions.**

Per NRS 122, applicants for a marriage license must present acceptable identification (ID). A list of acceptable ID may be found at [www.clarkcountynv.gov/depts/clerk](http://www.clarkcountynv.gov/depts/clerk). Select “Marriage Licenses.”

Upon approval from the County Clerk, a marriage license may be issued. The following must be presented:

- Completed and signed Application
- Completed and notarized Affidavit, signed within 15 days of the party coming to the Marriage License Bureau to apply for a marriage license
- Physician’s letter with the required information
- Acceptable Identification (ID)
APPLICANT’S INFORMATION

1) Name (full legal name without use of abbreviations or nicknames):
   First ___________________________ Middle ___________________________ Last ___________________________
   Suffix ___________ (ex. Jr, Sr, II)  Birth Last Name (Maiden/Surname) ___________________________

   PLEASE NOTE: If you wish to designate a new middle and/or last name to be known as after marriage, refer to the instructions on the back of this form for the name choices allowed by Nevada law and then enter them below:
   New Middle ___________________________ New Last ___________________________

2) Gender:  □ Male  □ Female

3) Social Security No. (U.S.): ___________________________

4) Birth Information (when and where you were born):
   Date ____/____/______ Age _____ State ___________________________ Country ___________________________

5) Residence Information (physical location where you currently live):
   City ___________________________ State ___________________________ Country ___________________________

6) Have you ever been married?  □ No  (If No, skip to question 7)  □ Yes  (If Yes, complete a, b, c and d below)
   a) Including the marriage you are getting a license for, how many times have you been married? _________
   b) Select your current marital status (choose only one):  □ Divorced  □ Widowed  □ Annulled
   c) Date of divorce/death of spouse/annulment: ___________________________ (Month/Day/Year)
   d) Location where divorce/death of spouse/annulment took place:
      City ___________________________ State ___________________________ Country ___________________________

7) Mailing Address:
   _____________________________________________________________
   (Provide the complete address where you receive mail)

PARENTS’ INFORMATION

8) Parent #1 - Father’s/Mother’s Name at Birth (Maiden Name):
   Last ___________________________ First ___________________________ Middle ___________________________
   Birth State ___________________________ Birth Country ___________________________

9) Parent #2 - Father’s/Mother’s Name at Birth (Maiden Name):
   Last ___________________________ First ___________________________ Middle ___________________________
   Birth State ___________________________ Birth Country ___________________________

ATTENTION: Your marriage license and certificate will be prepared with the information provided on this form. Your first name must match the name printed on the identification shown. It is your responsibility to ensure that ALL INFORMATION is accurate and spelled correctly. Typographical errors discovered after the ceremony may be corrected upon written request to this office. Corrections to marriage records will be approved on a case-by-case basis and may be subject to a $79.50 fee. By signing below, I acknowledge that I have read and understand the statement above.

Applicant’s Signature _______________________________________________
Instructions on Designating a New Middle and/or Last Name to Be Known As:

NRS 122.040(8): At the time of issuance of the license, an applicant or both applicants may elect to change the middle name or last name, or both, by which an applicant wishes to be known after solemnization of the marriage. The first name of each applicant selected for use by the applicant after solemnization of the marriage must be the same as the first name indicated on the proof of the applicant’s name submitted pursuant to subsection 2. An applicant may change his or her name pursuant to this subsection only at the time of issuance of the license. One or both applicants may adopt:

a) As a middle name, one of the following:
1) The current last name of the other applicant.
2) The last name of either applicant given at birth.
3) A hyphenated combination of the current middle name and the current last name of either applicant.
4) A hyphenated combination of the current middle name and the last name given at birth of either applicant.

b) As a last name, one of the following:
1) The current last name of the other applicant.
2) The last name of either applicant given at birth.
3) A hyphenated combination of the potential last names described in paragraphs (a) and (b).

Below is an example of a couple getting married and the possible new middle and last names that are acceptable according to the guidelines above.

<table>
<thead>
<tr>
<th>PARTY 1 EXAMPLE</th>
<th>PARTY 2 EXAMPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current First Name:</td>
<td>Current First Name:</td>
</tr>
<tr>
<td>JANE</td>
<td>JOHN</td>
</tr>
<tr>
<td>Current Middle Name:</td>
<td>Current Middle Name:</td>
</tr>
<tr>
<td>RACHEL</td>
<td>QUINCY</td>
</tr>
<tr>
<td>Current Last Name:</td>
<td>Current Last Name:</td>
</tr>
<tr>
<td>SMITH</td>
<td>ADAMS</td>
</tr>
<tr>
<td>Last Name at Birth:</td>
<td>Last Name at Birth:</td>
</tr>
<tr>
<td>JONES</td>
<td>ADAMSON</td>
</tr>
</tbody>
</table>

Acceptable MIDDLE Name Choices:
- ADAMS
- ADAMSON
- ADAMSON-QUINCY
- ADAMSON-RACHEL
- ADAMS-QUINCY
- ADAMS-RACHEL
- JONES
- JONES-QUINCY
- JONES-RACHEL
- QUINCY-ADAMS
- QUINCY-ADAMSON
- QUINCY-JONES
- QUINCY-SMITH
- RACHEL
- RACHEL-ADAMS
- RACHEL-ADAMSON
- RACHEL-JONES
- RACHEL-SMITH
- SMITH-QUINCY
- SMITH-RACHEL

Acceptable LAST Name Choices:
- ADAMS
- ADAMS-ADAMSON
- ADAMS-JONES
- ADAMSON
- ADAMSON-ADAMS
- ADAMSON-JONES
- ADAMSON-SMITH
- ADAMS-SMITH
- JONES
- JONES-ADAMS
- JONES-ADAMSON
- JONES-SMITH
- SMITH
- SMITH-ADAMS
- SMITH-ADAMSON
- SMITH-JONES

Acceptable MIDDLE Name Choices:
- ADAMSON
- ADAMSON-QUINCY
- ADAMSON-RACHEL
- ADAMS-QUINCY
- ADAMS-RACHEL
- JONES
- JONES-QUINCY
- JONES-RACHEL
- QUINCY
- QUINCY-ADAMS
- QUINCY-ADAMSON
- QUINCY-JONES
- QUINCY-SMITH
- RACHEL
- RACHEL-ADAMS
- RACHEL-ADAMSON
- RACHEL-JONES
- RACHEL-SMITH
- SMITH-QUINCY
- SMITH-RACHEL

Acceptable LAST Name Choices:
- ADAMS
- ADAMS-ADAMSON
- ADAMS-JONES
- ADAMSON
- ADAMSON-ADAMS
- ADAMSON-JONES
- ADAMSON-SMITH
- ADAMS-SMITH
- JONES
- JONES-ADAMS
- JONES-ADAMSON
- JONES-SMITH
- SMITH
- SMITH-ADAMS
- SMITH-ADAMSON
- SMITH-JONES

Please Note: Designating a new name upon issuance of your marriage license is optional. If you designate a new name now and wish to change or add it after your marriage ceremony, you will be subject to a fee.
AFFIDAVIT OF ISSUANCE OF MARRIAGE LICENSE TO ONE PARTY
HOSPITALIZED APPLICANT

STATE OF NEVADA
COUNTY OF CLARK

I ________________________________

wish to marry ________________________________.

No blood relationship exists between the two of us closer than that allowed by law. I am free to marry and no legal objection exists to this marriage.

___________________________________________
Signature of Absent Party

Signed and sworn to (or affirmed) before me on this

______ day of ______________________, 20____,

by ________________________________________.

__________________________________________
Printed name of applicant

__________________________________________
Signature of Notarial Officer