

# WEDDING APPLICATION

Date of Wedding \_\_\_\_\_ Time of Wedding \_\_\_\_\_

Place of Wedding \_\_\_\_\_  
(Must be in Lake County)

Name of Bride

Last	Middle Initial	First

Address

Street	City	St      Zip

Telephone

(      )	(      )
Home	Cell

Name of Groom

Last	Middle Initial	First

Address

Street	City	St      Zip

Telephone

(      )	(      )
Home	Cell

Fee (\$75.00)      *Fee will be donated to one of the following charities, and is payable at least 1 week before wedding:*  
*Please select one:*

- Whiting/Robertsdale Museum Fund
- Gimme Shelter Animal Fund
- Whiting Food Pantry

Receipt Number \_\_\_\_\_

Date of Marriage License Application from Lake County \_\_\_\_\_  
(License Required to Perform Ceremony)

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Mayor's Signature of Approval*

\_\_\_\_\_  
*Date*