

SOUTH DAKOTA MARRIAGE LICENSE APPLICATION

This is a legal document. Complete in ink and do not alter.



OVERVIEW

Marriage is a personal relation, arising out of a civil contract to which the consent of parties capable of making it is necessary. Consent alone does not constitute a marriage; it must be followed by a solemnization. Complete the following application to obtain a license to marry in the state of South Dakota.

Both parties must be present and show acceptable identification such as:

- a valid passport
- federal, state, military, or tribal photo identification
- certified birth certificate along with current school or employment photo ID **or**;
- a certified birth certificate along with a U.S. Department of Treasury Form 4029 that is completed. (**SDCL 25-1-10.1**)

Marriage License	\$40
Certified Copy of Marriage Certificate	\$15

The license to marry is valid only in the state of South Dakota and will become void and of no effect unless the marriage is solemnized within 90 days from the purchase of your license.

South Dakota law does not permit marriage of those under 16 years of age. Individuals the age of 16 and 17 must have parental consent prior to issuance of the license.

Once you are married, the individual who solemnizes the marriage must return the license to the Register of Deeds within 10 days. If not returned, there will be no record of your marriage.

Per **SDCL 25-1-30**, marriage may be solemnized by a justice of the Supreme Court, a judge of the circuit court, a magistrate, a mayor, either within or without the corporate limits of the municipality from which the mayor was elected, or any person authorized by a church to solemnize marriages. The South Dakota Department of Health does not maintain lists of individuals able to perform marriage ceremonies.

After solemnization and filing of your marriage license, a certified copy of the marriage certificate can be obtained from any South Dakota Register of Deeds Office or the Office of Vital Records.

For additional information on South Dakota marriage requirements, see **SDCL Chapter 25-1** or visit <https://doh.sd.gov/records/marriage-requirements.aspx>

Information provided on this application is used to create a South Dakota marriage license. Once the Register of Deeds presents your marriage license, review the information listed to ensure accuracy.

SOUTH DAKOTA MARRIAGE LICENSE APPLICATION



SOUTH DAKOTA
DEPARTMENT OF HEALTH

This is a legal document. Complete in ink and do not alter.

SPOUSE A INFORMATION					
First Name	Middle Name	Last Name	Suffix		
Middle Name After Solemnization of Marriage – A middle name may only be changed if an applicant is changing their surname to become a middle name (SDCL 25-1-10.1)		Last Name After Solemnization of Marriage - Acceptable surnames are Spouse A’s surname, Spouse B’s surname or Spouse A and Spouse B’s hyphenated surnames (SDCL 25-1-10.1)			
Residence Address - Physical location of home NO PO BOXES		Apt #	Inside City Limits?		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
City	County	State	Phone Number		
Birth State/Country		Date of Birth	Age		
STATISTICAL INFORMATION – the information collected below is used for statistical purposes only and will not be published on a certified copy of the marriage record.					
Sex	Of Hispanic Origin?				
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> NO- not Spanish/Hispanic/Latina <input type="checkbox"/> YES- Mexican, Mexican American, Chicano <input type="checkbox"/> YES- Puerto Rican <input type="checkbox"/> YES- Cuban <input type="checkbox"/> YES- other Spanish/Hispanic/Latina (e.g. Spaniard, Salvadoran, Dominican, Columbian) Specify _____				
Race – select all that apply. Do not use country of birth					
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK or AFRICAN AMERICAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> JAPANESE </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> KOREAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> SAMOAN <input type="checkbox"/> GUANAMIAN or CHAMORRO <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> OTHER ASIAN _____ <input type="checkbox"/> OTHER PACIFIC ISLANDER _____ <input type="checkbox"/> OTHER _____ </td> </tr> </table>				<input type="checkbox"/> WHITE <input type="checkbox"/> BLACK or AFRICAN AMERICAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> JAPANESE	<input type="checkbox"/> KOREAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> SAMOAN <input type="checkbox"/> GUANAMIAN or CHAMORRO <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> OTHER ASIAN _____ <input type="checkbox"/> OTHER PACIFIC ISLANDER _____ <input type="checkbox"/> OTHER _____
<input type="checkbox"/> WHITE <input type="checkbox"/> BLACK or AFRICAN AMERICAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> JAPANESE	<input type="checkbox"/> KOREAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> SAMOAN <input type="checkbox"/> GUANAMIAN or CHAMORRO <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> OTHER ASIAN _____ <input type="checkbox"/> OTHER PACIFIC ISLANDER _____ <input type="checkbox"/> OTHER _____				
# of Previous Marriages	Marital Status				
	<input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Annulment				
Disclosure of the social security number is mandatory pursuant to SDCL 25-7A-56.2 and the Social Security Act § 205(c)(2), 42 U.S.C. § 405(c)(2) (1998) . The social security number will be used by the Department of Social Services to facilitate collecting child support and locating child support obligors.					
Social Security Number: _____ - _____ - _____					

SOUTH DAKOTA MARRIAGE LICENSE APPLICATION



SOUTH DAKOTA
DEPARTMENT OF HEALTH

This is a legal document. Complete in ink and do not alter.

SPOUSE B INFORMATION			
First Name	Middle Name	Last Name	Suffix
Middle Name After Solemnization of Marriage – <i>A middle name may only be changed if an applicant is changing their surname to become a middle name (SDCL 25-1-10.1)</i>		Last Name After Solemnization of Marriage - <i>Acceptable surnames are Spouse A’s surname, Spouse B’s surname or Spouse A and Spouse B’s hyphenated surnames (SDCL 25-1-10.1)</i>	
Residence Address - <i>Physical location of home NO PO BOXES</i>		Apt #	Inside City Limits?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
City	County	State	Phone Number
Birth State/Country		Date of Birth	Age
STATISTICAL INFORMATION – <i>the information collected below is used for statistical purposes only and will not be published on a certified copy of the marriage record.</i>			
Sex	Of Hispanic Origin?		
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> NO- not Spanish/Hispanic/Latina <input type="checkbox"/> YES- Mexican, Mexican American, Chicano <input type="checkbox"/> YES- Puerto Rican <input type="checkbox"/> YES- Cuban <input type="checkbox"/> YES- other Spanish/Hispanic/Latina (e.g., Spaniard, Salvadoran, Dominican, Columbian) Specify _____		
Race – <i>select all that apply. Do not use country of birth</i>			
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK or AFRICAN AMERICAN <input type="checkbox"/> ASIAN INDIAN <input type="checkbox"/> CHINESE <input type="checkbox"/> FILIPINO <input type="checkbox"/> VIETNAMESE <input type="checkbox"/> JAPANESE </div> <div style="width: 50%;"> <input type="checkbox"/> KOREAN <input type="checkbox"/> NATIVE HAWAIIAN <input type="checkbox"/> SAMOAN <input type="checkbox"/> GUANAMIAN or CHAMORRO <input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> OTHER ASIAN _____ <input type="checkbox"/> OTHER PACIFIC ISLANDER _____ <input type="checkbox"/> OTHER _____ </div> </div>			
# of Previous Marriages	Marital Status		
	<input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Annulment		
<i>Disclosure of the social security number is mandatory pursuant to SDCL 25-7A-56.2 and the Social Security Act § 205(c)(2), 42 U.S.C. § 405(c)(2) (1998). The social security number will be used by the Department of Social Services to facilitate collecting child support and locating child support obligors.</i>			
Social Security Number: _____ - _____ - _____			

