Denny Thompson, Clerk & Comptroller Bradford County



PARENTAL CONSENT FOR MARRIAGE OF MINOR STATE OF FLORIDA COUNTY OF BRADFORD

BE IT KNOW, that We (I), the Parent(s) or Guardian(s) of (name of	
minor; hereafter referred to as "minor") who is	years of age, do hereby give our (my) consent to marriage
to, who is not m	ore than two (2) years older than minor. The minor's birth
certificate is attached to this consent form.	

NOTE: Both parents must sign this consent form unless one parent is deceased, one parent has been granted sole parental responsibility by court order, or there is only one legal parent. PLEASE INDICATE BELOW:

One legal parent (as indicated on birth certificate).

Sole parental responsibility (certified dissolution or paternity judgment attached)

Other parent deceased (certified death certificate attached).

Signature of Parent

Signature of Parent

Printed Name of Parent

Printed Name of Parent

NOTE: Both parents are required to sign this consent unless they either are divorced and one parent was given SOLE parental responsibility of minor by a court order, or if the non-signing parent is deceased.

The foregoing instrument was acknowledged before me on_____ by

_____and _____

Deputy Clerk/Notary Public (signature)

(Name typed, printed, or stamped)

____Personally Known

Produced Identification; Type of identification produced _____