

FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF

.....
In the Matter of the Application of

A Person under 16 Years of Age for
Consent to the Issuance of a Marriage
License
.....

Docket No.

PETITION FOR
CONSENT TO
MARRY

TO THE FAMILY COURT:

The undersigned Petitioner respectfully shows that:

1. Petitioner is a female male under the age of 16
years, having been born on [specify date of birth]: .

2. Petitioner resides at [specify address unless ordered confidential under Family Court Act
§154-b]: New York, with

3. Petitioner's parents are:
NAME ADDRESS (unless ordered confidential under Family Court Act §154-b)

4. a. Petitioner would like to apply to the [specify]: Clerk of [specify city or town]:
in the county of [specify]:
for a license to marry [specify name of prospective spouse]:

b. He/She is a female male, who is [specify age]: years of age¹, having been
born on [specify date of birth]:

c. [Applicable if prospective spouse is under 16; delete if inapplicable]:
He/She has applied will apply to this Court another Court [specify]: for
permission to obtain a license to marry Petitioner.

d. He/She resides at [specify address unless ordered confidential under Family Court Act
§154-b]:

e. He/She is employed as: a student at: other:

¹ If prospective spouse is under 16 years of age, a separate petition must be filed.

5. Petitioner believes that such marriage would be in Petitioner's best interest and welfare because:

6. Petitioner has no mental or physical disability, except [specify; delete if not applicable]:

and to the best of Petitioner's knowledge or information, the prospective spouse has no mental or physical disability, except [specify; delete if not applicable]:

7. No previous application has been made to any court or judge for the relief herein requested, except [specify; delete if not applicable]:

WHEREFORE, Petitioner respectfully requests an order approving and consenting to the issuance to Petitioner of a license to marry as provided by Section 15 of the Domestic Relations Law; and for the following additional relief [specify; delete if none requested]:²

Dated:

Petitioner

Print or type name

Signature of Attorney, if any

Attorney's Name (Print or Type)

Attorney's Address and Telephone Number

VERIFICATION

STATE OF NEW YORK)
COUNTY OF)

ss.:

_____, being duly sworn, says that (s)he is the Petitioner in the above petition; that (s)he has read the foregoing petition and the same is true to (her) (his) own knowledge, except as to matters therein stated to be alleged on information and belief and as to those-matters (s)he believes them to be true.

² Additional relief may include dispensing with the examination, serological test and laboratory statement and with waiting requirements.

