INMATE MARRIAGE REQUEST

The inmate will complete the first section of the form and send it to their fiancé. After completing the fiancée section, the fiancé will submit this form to the Oklahoma Department of Corrections Agency Chaplain and Volunteer Services Administrator. The form can be submitted by mail or as PDF document via email to:

ODOC Agency Chaplain PO Box 11400 Oklahoma City, OK 73136-0400

Office Phone: 405-425-7312 / email: leo.brown@doc.ok.gov

To be completed by the inmate submitting this request:

Last Name:	First Name:	MI:
ODOC #:	Facility:	Housing Unit:
	I wish to marry the person listed b	elow:
Last Name:	First Name:	MI:
Fiancés Gender (Circle One)	: Male Female	
Street Address:	City/State/Zip:	
	Date of Birth:	
Inmate Signature:		Date:
To be completed by the inn	• • • • • • • • • • • • • • • • • • •	
I met my fiancé on (month/d	at (location) lay/year) at (location)	
I understand that my fiance is	s serving a total sentence of year	s for the crime(s) of
another facility at any time.		I know that they may be transferred to eration will be given to my fiancé upon our arried.
It is the outside fiancé's res	oonsibility to arrange for a person to perforn	n the ceremony who is legally authorized to
do so under Oklahoma sta	ate statute and to provide evidence of their s	status to the facility along with information
necessary to conduct a ba	ackground check. This information may be p	rovided after this form is submitted but at
	least 45 days prior to the scheduled c	<u>eremony.</u>
The person performing the m	narriage ceremony will be:	
Name:	Organization:	
Telephone Number:	Email Address:	
	itled "Inmate Marriages" and realize that alenducted according to this procedure.	ll aspects of the marriage process and the
Fiancé Signature:	Email Add	ress:
Date:	Best Contact Phone Number:	
		(R 04/25)