

## Acknowledgement of JR Policy 6.70 Marriage in JR Facilities

\_\_\_\_\_  
Name of JR Young Adult

\_\_\_\_\_  
JR Number

We agree we read and fully understand JR Policy 6.70 Marriage in JR Facilities, and followed the requirements listed in the policy.

We understand if [JR Policy 6.70 Marriage in JR Facilities](#) is not fully followed, we will not be eligible to participate in any programs or privileges JR may offer for married individuals (e.g. extended family visits).

\_\_\_\_\_  
JR Young Adult Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Intended Spouse Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

JR CASE MANAGER	
JR Case Manager Name:	Date:
Signature:	

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by [Executive Order 16-01](#), [RCW 42.56](#), and [RCW 40.14](#).