

Affidavit of Common-Law Marriage

This form must be completed and returned to Rocky Mountain Health Plans (RMHP) before enrollment of a common-law spouse will be considered. Submitting this form means you are requesting RMHP to consider enrollment of a common-law spouse of Subscriber.

Statement of Common-Law Marriage

We, the undersigned, being of lawful age, attest to the following facts:

- From _____, year _____, to the present date indicated below, we have agreed and profess to be husband and wife, and we have openly held ourselves out to the community as being married. During this period, we have lived together continuously as husband and wife.
- We are at least 18 years of age or, if our ages are between 16 and 18, we have obtained proper parental or guardian consent.
- No legal impediment to our marriage exists. Before entering into this marriage, if either partner was in a prior marriage, that marriage was legally terminated, by death or divorce.

_____ is currently or is applying to be an RMHP subscriber.
Subscriber

_____ is my lawful spouse by virtue of common law marriage and desires to be covered as my eligible dependent, as defined by RMHP.
Common Law Spouse

The undersigned swear and affirm that the above facts are true.

Name of Subscriber (Please Print):

Signature of Subscriber:

Date:

Name of Spouse/Dependent (Please Print):

Signature of Spouse/Dependent:

Date:

Return to:
Rocky Mountain Health Plans
PO Box 10600
Grand Junction, CO 81502-5600
Email: commercialenrollment@rmhp.org
Fax: (970)263-5507