

Registration Affidavit for Premarital Preparation Course

Before me, the undersigned authority, personally appeared the individual, designated as "Affiant", who after being duly cautioned and sworn, deposes and states as follows:

1. Affiant's name is: \_\_\_\_\_
  
2. Affiant's address, phone number and e-mail address is:  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Affiant is the provider of a premarital preparation course prescribed by § 741.0305, F.S. The course provided complies with the course requirements set forth by the statute, and all course materials are attached herein.
  
4. The premarital preparation course instructor's name is: \_\_\_\_\_
  
5. The premarital preparation course instructor's qualifications are as follows:  
(Check applicable qualification(s) and provide license # where indicated)
  - a. \_\_\_ psychologist licensed under Chapter 490, Florida Statutes:  
License Number \_\_\_\_\_
  
  - b. \_\_\_ clinical social worker licensed under Chapter 491, Florida Statutes:  
License Number \_\_\_\_\_
  
  - c. \_\_\_ marriage and family therapist licensed under Chapter 491, Florida Statutes:  
License Number \_\_\_\_\_
  
  - d. \_\_\_ mental health counselor licensed under Chapter 491, Florida Statutes:  
License Number \_\_\_\_\_
  
  - e. \_\_\_ official representative of a religious institution recognized under § 496.404(19), Florida Statute, with the following relevant training: \_\_\_\_\_
  
  - f. \_\_\_ school counselor who is certified to offer the course

\_\_\_\_\_  
Affiant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who produced the following identification: \_\_\_\_\_.

Official Seal

\_\_\_\_\_  
Clerk of the Circuit Court or Notary Public

Please return to:

Debra Oats  
Fifteenth Judicial Circuit  
205 North Dixie Highway, Room 5.2500  
West Palm Beach, FL 33401