

REGISTRATION AFFIDAVIT FOR PREMARITAL PREPARATION COURSE PROVIDER

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: _____
Church/Organization: _____
 - 2. Affiant's address is: _____

Phone (____)-_____ eMail or website: _____
 - 3. Affiant is the provider of a premarital preparation course prescribed by 741.0305 Florida Statute. The course provided complies with the course requirements set forth by the Florida Statutes.
 - 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: _____
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- f. _____ School counselor who is certified to offer the course.

Affiant Signature

Print Name

Sworn to and subscribed before me this _____ day of _____, 20_____, who is personally known to me or who produced the following identification:

_____.

Clerk of the Circuit Court or Notary Public

Official Seal

Please Return to: Clerk of the Circuit Court, Recording/Marriage Dept.
3315 Tamiami Trail E, Ste 102, Naples FL 34112