



VICTOR D. CRIST

CLERK OF CIRCUIT COURT & COMPTROLLER
HILLSBOROUGH COUNTY, FL

Premarital Course Provider Registration Instructions and Affidavit

Instructions:

1. **Check** the definition of a qualified premarital preparation course instructor that applies to you.
2. **Complete** Course Instructor Information section.
3. **Sign Affidavit in the presence of a qualified Notary Public.**
4. **Attach** a statement as to relevant training, if you are a representative of a religious institution.
5. **Return** the completed affidavit to Hillsborough County Clerk of Court & Comptroller's Office by mail, fax, or email.

Mail: P.O. Box 3249

Tampa, FL 33602

Fax:

813-276-2114

Email:

recording@hillsclerk.com

PREMARITAL COURSE PROVIDER AFFIDAVIT

Florida Statute 741.0305(3)(a) defines a qualified premarital preparation course instructor as (select your applicable qualification):

- A psychologist licensed under Florida Statute chapter 490. License No. _____
- A clinical social worker licensed under Florida Statute chapter 491. License No. _____
- A marriage and family therapist licensed under Florida Statute chapter 491. License No. _____
- A mental health counselor licensed under Florida Statute chapter 491. License No. _____
- An official representative of a religious institution which is recognized under Florida Statute 496.404(23).

Include or attach a statement of relevant training: _____

- Any other provider designated by a judicial circuit, including, but not limited to, school counselors who are certified to offer such courses. *Attach a copy of such designation.*

Course Instructor Information (*this info is subject to public records requests and may be published online at hillsclerk.com*):

- Choose One: This is a new registration
 This is an updated registration

Name: _____

Address: _____

Title: _____

City, State: _____

Organization: _____

Zip: _____

Business Phone: _____

Email: _____

Cell Phone: _____

Website: _____

Before me, the undersigned authority, personally appeared _____, who, being duly sworn, deposes and says:

1. I have met all the requirements for a Premarital Course Provider under section 741.0305 and as such am qualified to serve as a Premarital Course Provider.
2. As an instructor, my qualifications and license number (if any) are included and attached hereto and made a part hereof. (Note: if an instructor is an official representative of a religious institution, their relevant training must be included.)
3. Provide counseling to same gender couples: Yes _____ or No _____.
4. At the conclusion of the Premarital Course, I will issue all course participants a Certificate of Completion in compliance with the requirements set forth under chapter 741.
5. The above statements are true and shall take effect upon the signing of this affidavit.

Signature _____

Date: _____

SWORN TO AND SUBSCRIBED BEFORE ME, this _____ day of _____, 20____, by _____, who is personally known to me or has produced _____ as identification.

Signature of Notary

(SEAL)

Printed Name of Notary Public

Commission Number: _____

Commission Expiration Date: _____