



State of Louisiana

Louisiana Department of Health
Office of Public Health

COVENANT MARRIAGE AFFIDAVIT AND ATTESTATION (FOR USE BY COUPLES WHO ARE ALREADY MARRIED)

STATE OF _____
PARISH OF _____

BEFORE ME, the undersigned Notary Public, personally came and appeared:

_____ and _____
(Name of Spouse) (Name of Spouse)

who being duly sworn, deposed and said that they received premarital counseling from

_____, _____
(Name of Counselor) (Title of Counselor)

which counseling included a discussion of the seriousness of covenant marriage, communication of the fact that a covenant marriage is a commitment for life, a discussion of the obligation to seek marital counseling in time of marital difficulties, and a discussion of the grounds for legally terminating a covenant marriage by divorce after a judgment of separation from bed and board.

(Signature of Spouse) (Signature of Spouse)

ALSO BEFORE ME, the undersigned Notary Public, personally came and appeared:

_____ who being duly sworn, deposed and said
(Name of Counselor)

that _____ counseled the above couple as to the nature and purpose of
(he/she)

marriage and the grounds of termination thereof and provided a copy of the pamphlet entitled Covenant Marriage Act to the couple entering into the Covenant Marriage.

(Signature of Counselor)

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF
_____, 20_____.