

## Understanding the Registry

### Patient and Caregiver Initial Application Instructions

Once your qualified physician has entered your information into the Medical Marijuana Use Registry, you will be able to apply for your Medical Marijuana Use Registry Identification Card. The quickest and easiest way to apply for your ID card is online through the Registry. Follow the steps below to complete your online application.

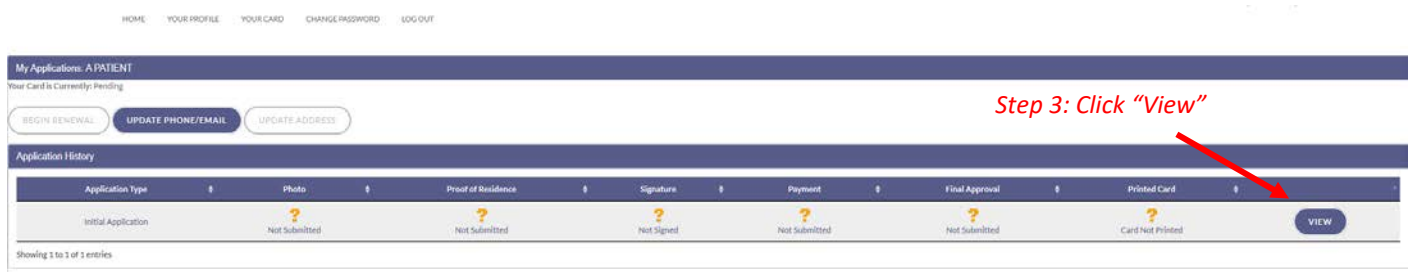
\*Get help logging into the Medical Marijuana Use Registry by [clicking here](#).

**Step 1:** Log into the Medical Marijuana Use Registry <https://mmuregistry.flhealth.gov/>.

**Step 2:** Navigate to the “Your Card” menu option at the top of the page to view your identification card application.



**Step 3:** After clicking “Your Card,” you are brought to your Application History page. Click “View” next to the initial application to be navigated to the application page.



Your photograph is imported directly from your Florida Driver’s License or Florida Identification card. If the photograph from your Florida Driver’s License or Florida Identification card did not automatically import, please contact your physician and confirm they have entered your Social Security Number and Date of Birth correctly.

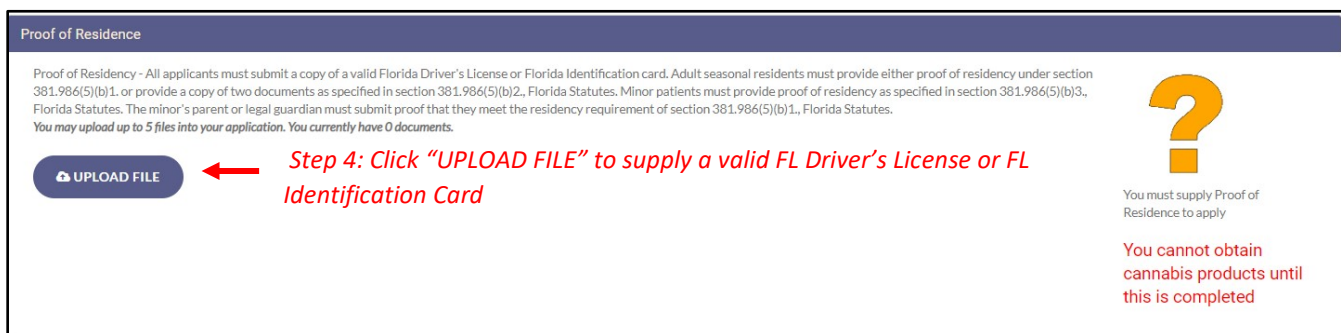
\*For instructions on uploading a photograph from a desktop/laptop computer, [click here](#).

\*For instructions on uploading photograph from a mobile device, [click here](#).

**Step 4:** Upload a copy of your Florida Driver’s License or Florida Identification card under the Proof of Residence section. Click “Upload File.” Select the file you wish to upload and click “Open.” The document will appear below the “Upload File” button.

\*For instructions on uploading proof of residence from a desktop/laptop computer, [click here](#).

\*For instructions on uploading proof of residence from a mobile device, [click here](#).



**Step 5:** Once you have submitted a current copy of your proof of residence, you must electronically sign your application. Scroll to the bottom of the page and type in your first and last name in the appropriate boxes.

**Step 6:** Click “Submit My Card Application.”

Signature

To sign below, supply **Any** in the First Name text box, and **Patient** in the Last Name text box.

Type in your first name:  ← **Step 5: Type your first name**

Type in your last name:  ← **Step 5: Type your last name**

**SUBMIT MY CARD APPLICATION** ← **Step 6: Click “SUBMIT MY CARD APPLICATION”**

**?**  
You must sign to apply  
You cannot obtain cannabis products until this is completed and reviewed by the Office of Medical Marijuana Use

The undersigned persons certify that the applicant has requested a physical Medical Marijuana Use Registry Identification Card as authorized under section 381.986, Florida Statutes, and Chapter 64-4, F.A.C. The information contained in this application and in any attached exhibits that serves as a basis for card issuance, is accurate and complete, and that no one other than me or my caregiver is submitting this request on my behalf. I understand that knowingly making a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree punishable as provided in sections 775.062 or 775.063, Florida Statutes.

A pop-up message will appear, stating that the application is not complete until you submit the processing fee.

**Step 7:** Click “Close.”

**Payment Available**

Thank you for submitting your Medical Marijuana Use Registry application. Your application is not complete until we receive your processing fee.

Please go to the Payment Record section to either Pay Online or Pay by Mail.

**CLOSE** ← **Step 7: Click “CLOSE”**

**Step 8:** Click the button that says, “Click Here to Pay Online,” which will appear after you submit your card application.

**Step 9:** A new window will open containing the Bill2Pay interface, where you can supply your payment details. Payments by e-check and credit card are accepted. A \$2.75 convenience fee applies to each online payment.

You can also send your payment by check or money order, made payable to Florida Department of Health. You may mail in your payment to the following address:

Florida Department of Health  
ATTN: Office of Medical Marijuana Use  
P.O. BOX 31313  
Tampa, FL 33631-3313

Payment Record

Cards cannot be issued or renewed until the Office of Medical Marijuana Use receives a \$75 processing fee.

Pay By Mail:  
You may mail in your payment in to the following address:

Florida Department of Health  
ATTN: Office of Medical Marijuana Use  
PO Box 31313  
Tampa, FL 33631-3313

Pay Online:  
If you have already sent in your payment in the form of a check or money order, please do not click on the payment link as this will generate duplicate payments against your account.

**CLICK HERE TO PAY ONLINE** ← **Step 8: Click “CLICK HERE TO PAY ONLINE”**

A \$2.75 convenience fee will be added to each online payment.

**?**  
A Payment has not been processed

Print the confirmation of the payment for your records after finalizing your payment.

\*You can check the status of your application as it is reviewed. [Click here](#) for a guide of the icons on your online application and their meaning.

Once your Identification Card application has been approved, you will then be able to contact one of the [licensed medical marijuana treatment centers](#) to fill an order.