

## 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.

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

If you do not remember your password, you may reset it yourself by selecting [Forgot Password](#) on the Login page. For step-by-step instructions to reset your password, see our [Resetting My Password](#) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

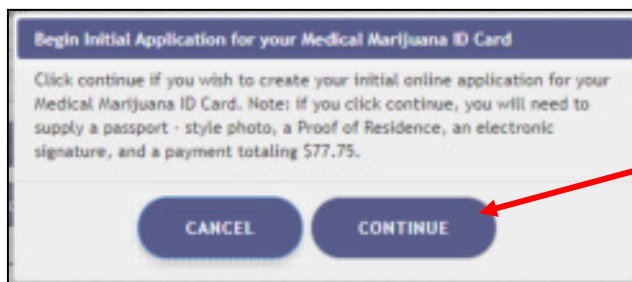
**Step 2:** Navigate to the “YOUR CARD” menu option at the top of the page to view your identification card application.



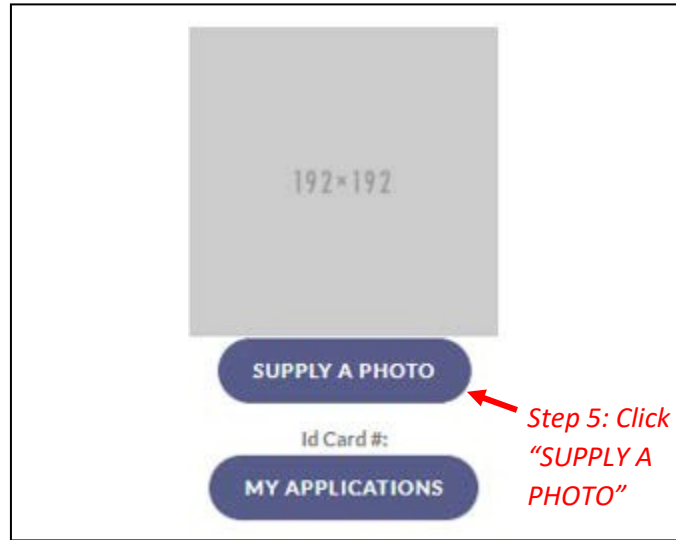
**Step 3:** After clicking “YOUR CARD,” you are brought to your Application History page. Click “BEGIN INITIAL APPLICATION” to create your initial application.



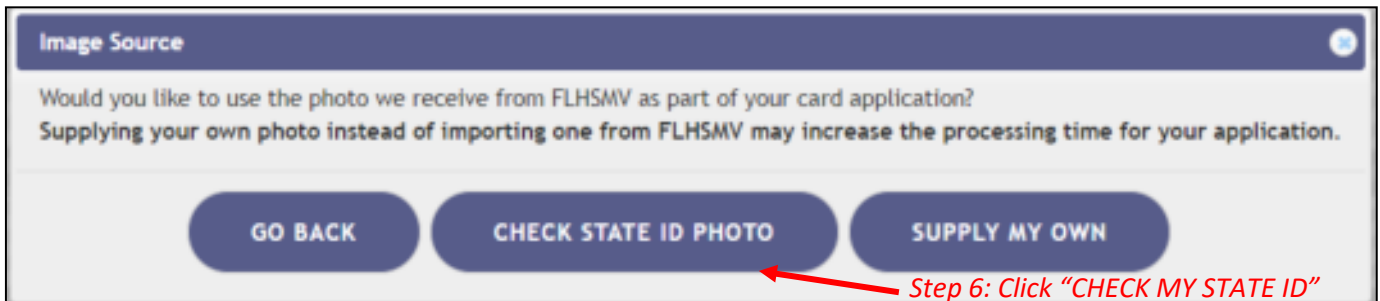
**Step 4:** A prompt will appear for you to confirm that you wish to continue to the Initial Application. Click “CONTINUE” to proceed to the application.



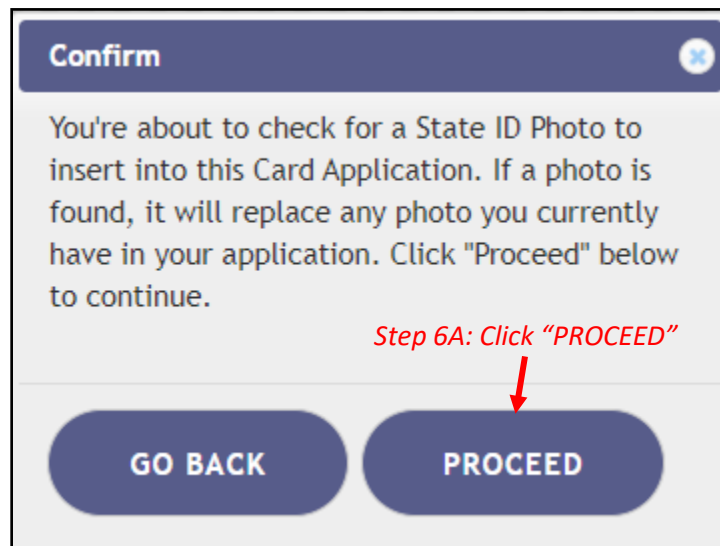
**Step 5:** Once you have clicked the “CONTINUE” button, you are brought to your initial application page. Click “SUPPLY A PHOTO” to either supply your State ID photo, or to supply your own passport style photo to your application.



**Step 6:** Clicking “CHECK MY STATE ID” will upload your driver’s license photo from the Florida Department of Highway Safety and Motor Vehicles’ (FLHSMV) demographic database. Clicking “SUPPLY MY OWN” will allow you to upload your own photo from your device. (Using the FLHSMV sourced data will automatically approve the photo and may cut down on processing time, while supplying your own photo may increase the processing time.)



**Step 6A:** Click “PROCEED.”

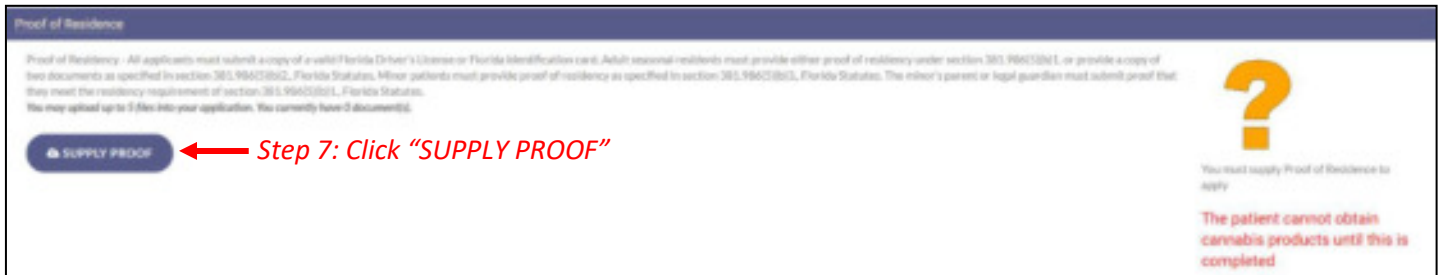


For step-by-step instructions on uploading your photo from your desktop/laptop computer, see our [Uploading a Photo from a Desktop Computer](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

For instructions on uploading your photo from a mobile device, see our [Uploading a Photo from a Mobile Device](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

**Step 7:** The next step will be to upload your Proof of Residency documentation. Scroll down to the section titled “Proof of Residency” and then click “SUPPLY PROOF.”

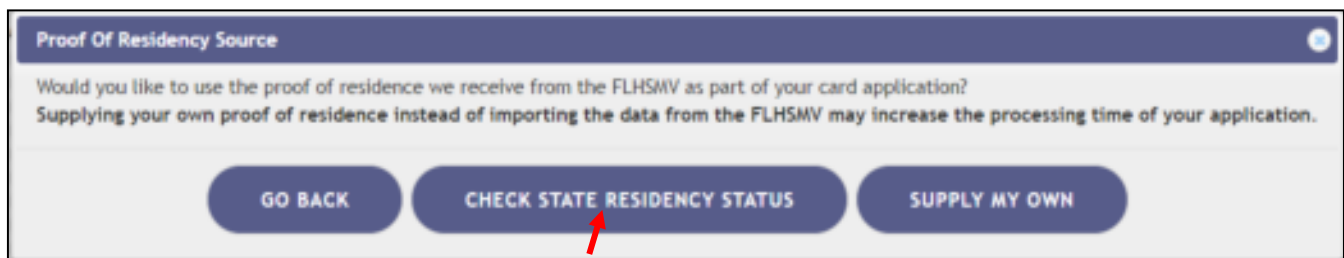
Review the [Required Proof of Residency Documentation](https://knowthefactsmmj.com/patients/cards) on our Know the Facts MMJ page (<https://knowthefactsmmj.com/patients/cards>)



**Step 8:** A prompt will appear for you to choose how to supply your documentation. Click “CHECK STATE RESIDENCY STATUS” to obtain your Driver License or Florida State ID from FLHSMV. If you wish to upload your own proof of residence, click “SUPPLY MY OWN” to supply your own proof of residency document. Select the file you wish to upload and click “OPEN.” The document will appear below the “SUPPLY RESIDENCE” button.

For instructions on uploading your proof of residence from a desktop/laptop computer, see our [Uploading Residency Documents from a Desktop Computer](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).

For instructions on uploading proof of residence from a mobile device, see our [Uploading Residency Documents from a Mobile Device](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ page (<https://knowthefactsmmj.com/registry/#instructional-guides>).





Step 8: Click “CHECK STATE RESIDENCY STATUS” to supply a valid FL Driver’s License or FL Identification Card

**Step 8A:** Click “PROCEED.”



**Step 9:** Review all data to make sure it is accurate. Then click “APPLY.”

Current Information:	Updated Information:
	
Last Name: ANY	Last Name: ANY
First Name: NAME	First Name: NAME
Middle Initial:	Middle Initial: Z
Date Of Birth: [REDACTED]	Date Of Birth: [REDACTED]
SSN: [REDACTED]	SSN: [REDACTED]
Florida DL or State ID #: A*****[REDACTED]	Florida DL or State ID #: A*****[REDACTED]
Gender: Male	Gender: Male
Address: 2900 APALACHEE PKWY B341	Address: 2900 APALACHEE PKWY B341
City: TALLAHASSEE	City: TALLAHASSEE
County: Leon	County: Leon
ZIP code: 32399-1025	ZIP code: 32399-1025
Permanent Florida resident?: Yes	Permanent Florida resident?: Yes
Seasonal Florida resident?: No	Seasonal Florida resident?: No
If Seasonal, Permanent State?: N/A	If Seasonal, Permanent State?: N/A
	<b>APPLY</b> ← <i>Step 9: Click “APPLY”</i>

**Step 10:** Read the confirmation message and click “APPLY” to confirm.

**Apply to your Card Application?**

Proceeding will update your Card Application with the information shown.

**GO BACK**      **APPLY** ← *Step 10: Click “APPLY”*

**Step 11:** Electronically sign your application. Scroll to the bottom of the page to the signature section to type in your first name and last name in the boxes provided.

**Step 12:** Click “SUBMIT MY CARD APPLICATION.”

**Step 13:** A pop-up message will appear, stating that the application is not complete until you submit the processing fee. Click “CLOSE.”

**Step 14:** Click the button that says, “CLICK HERE TO PAY ONLINE.”

**Step 15:** A new window will open containing the Bill2Pay interface, where you can supply your payment details. Payments by e-check, credit card and debit card are accepted. A \$2.75 convenience fee applies to each online payment.

**Step 16:** Select Method of Payment. Currently credit cards, debit cards and e-checks are acceptable payment.

**Florida HEALTH**  
It's a New Day in Public Health.  
The Florida Department of Health works to protect, promote & improve the health of all people in Florida through integrated state, county, & community efforts.

1 Payment Details   2 Confirm Payment   3 Payment Complete

Select Payment Amount  
AMOUNT DUE : \$77.75

Select Payment Method  
 Credit Card    Bank Account

Name on Bank Account:  
Name on Bank Account

Account Type:  
Select an option...

Routing Number: ?  
Routing Number

Account Number: ?  
Account Number

My Account Details  
PATIENT ID  
DATE OF BIRTH  
ADDRESS  
AMOUNT DUE      \$77.75

Continue

*Step 16: Select Payment Method. Choose Credit Card for Credit Cards and Debit Cards or Bank Account for E-Checks*

**Step 16A:** If "Credit Card" was selected, fill out all the credit card information. Click "Continue" when finished.

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1 Payment Details   2 Confirm Payment   3 Payment Complete

Select Payment Amount  
AMOUNT DUE : \$77.75

Select Payment Method  
 Credit Card    Bank Account

Name on Card:  
Name on Card

Credit Card Number:  
Credit Card Number

Expiration Date:      CVV: ?  
MM / YY      CVV

My Account Details  
PATIENT ID  
DATE OF BIRTH  
ADDRESS  
AMOUNT DUE      \$77.75

Continue

*Step 16A: Fill out all payment information*

*Step 16A: Click "Continue" after all payment information is entered*



**Step 16B:** If “Bank Account” was selected, fill out all the banking information. Click “Continue” when finished.

**Step 16B:** Fill out all payment information

**Step 16B:** Click “Continue” after all payment information is entered

**Step 17:** Confirm that all the information is correct and input your email address, so you receive your payment confirmation.

**Step 17:** Confirm all information is correct

**Step 17:** Input Confirmation Email

**Step 17A:** Once you confirm all the information is correct and have input your email address, click “I agree to the Terms and Conditions.” Then click “Make a Payment.”

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1 Account Details 2 Payment Details 3 Confirm Payment 4 Payment Complete

Review your payment details [Edit Details](#)

PATIENT ID [Redacted]  
DATE OF BIRTH [Redacted]  
PAYMENT METHOD [Redacted]  
PAYMENT AMOUNT [Redacted]

Confirmation Email  
Email Address [Redacted]

I agree to the Terms and Conditions

[Cancel](#) [Make a Payment](#)

*Step 17A: Click "I agree to the Terms and Conditions"*

*Step 17A: Click "Make a Payment"*

**Step 18:** Click “Print for your Records” to print the confirmation of the payment for your records.

**Florida HEALTH**

1 Account Details 2 Payment Details 3 Confirm Payment 4 Payment Complete

Department of Health  
Thank you for your payment!  
[Click here to make another payment](#)

CONFIRMATION NUMBER [Redacted]

PATIENT ID [Redacted]  
DATE OF BIRTH [Redacted]  
PAYMENT DATE [Redacted]  
PAYMENT METHOD [Redacted]  
CONFIRMATION EMAIL [Redacted]  
PAYMENT AMOUNT [Redacted]

[Print for your Records](#)

*Step 18: Click "Print for your Records"*

Cards cannot be issued or renewed until the Office of Medical Marijuana Use receives a [\$75/\$15] processing fee. A 2.75 convenience fee will be added to each online payment.

Department of Health [www.Bill2Pay.com](http://www.Bill2Pay.com)



You can check the status of your application as it is being reviewed. To learn what each status icon stands for, please see our [Understanding My Application Status](https://knowthefactsmmj.com/registry/#instructional-guides) guide on our Know the Facts MMJ website (<https://knowthefactsmmj.com/registry/#instructional-guides>).

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. A complete list of licensed treatment centers can be found on our Know the Facts MMJ website (<https://knowthefactsmmj.com/mmtc>).

For additional information, visit  
**KnowTheFactsMMJ.com**