

**AFFIRMATION STATEMENT**



**CANADA )  
PROVINCE OF ALBERTA )  
TO WIT )**

**IN THE MATTER OF *RENEWAL*  
as REGISTERED FAMILY MEDIATOR:  
SEPARATION & DIVORCE**

I, \_\_\_\_\_ of \_\_\_\_\_,  
Alberta, AFFIRM THAT;

I am a Registered Family Mediator: *Separation & Divorce* and I am applying to be approved to continue such designation for the current year.

1. I have completed \_\_\_\_\_ hours of acceptable continuing education in the specific area of *Separation and Divorce* over the **past two years**. (Waived for 2021, completion is voluntary) Please specify:  
\_\_\_\_\_
2. I am currently a member of good standing of the Alberta *family* Mediation Society (AFMS).
3. I am covered and will continue to be covered for malpractice insurance through my liability insurance policy.
4. I agree to subscribe to the Members' Code of Professional Conduct approved by the Alberta *family* Mediation Society.
5. I have conducted at least \_\_\_\_\_ hours of family mediation in the specific area of *Separation and Divorce* in the **past year**. (50 hours are usually required, online hours qualify)
6. I agree to cease using the RFM designation, if requested to do so by the Board of Directors of the Alberta *family* Mediation Society.
7. I will supply proof of all the above undertakings (where applicable), if requested by the Alberta *family* Mediation Society.
8. I authorize the attached 50 words practice description to be published on the AFMS website (or leave as is).

**I promise that the contents of this Affirmation Statement are true and complete, and I solemnly affirm that this promise is binding on my conscience.**

DECLARED at \_\_\_\_\_ )  
in the Province of Alberta, this \_\_\_\_\_ day )  
of \_\_\_\_\_, 20\_\_\_\_ BEFORE ME )  
\_\_\_\_\_ )

\_\_\_\_\_  
**Signature of Declarant**

**Witness Signature (any adult)**