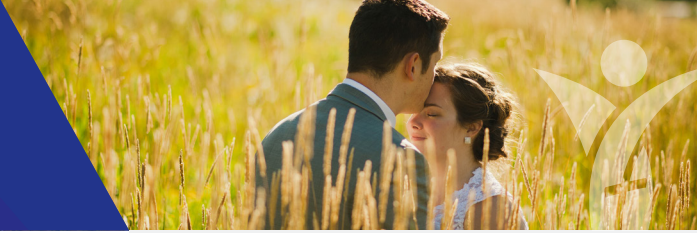


Marriage and Relationship Education



2018 Course Dates

'Before We Say I Do' Group Sessions: Friday evenings 5pm – 9pm plus Saturdays 9am – 5pm (except Course 1).

- ▶ Course 1/18: 10 & 17 February Newcastle Murray Room
- ▶ Course 2/18: 23 & 24 March Maitland
- ▶ Course 3/18: 4 & 5 May Newcastle Toohey Room
- ▶ Course 4/18: 3 & 4 August Newcastle Toohey Room
- ▶ Course 5/18: 19 & 20 October Singleton
- ▶ Course 6/18: 23 & 24 November Newcastle Toohey Room

FOCCUS Group, Three Monday Evening Sessions, Newcastle Toohey Room - 5.15pm - 7.15pm

- ▶ Group 1: 19 & 26 February (Session 3 to be confirmed)
- ▶ Group 2: 14 & 21 May (Session 3 to be confirmed)
- ▶ Group 3: 3 & 10 September (Session 3 to be confirmed)
- ▶ Group 4: 29 October & 5 November (Session 3 to be confirmed)

Course Fees

'Before We Say I Do' Group Session

\$320* (inc GST) per couple, includes course materials, morning tea and afternoon tea.

*Please note that a \$50 administration fee will be charged if cancellation occurs within two weeks of the course date.

FOCCUS Group Session

\$340** (inc GST) per couple, includes three 90 minute sessions.

FOCCUS Individual Session

\$400** (inc GST) per couple, by appointment only, includes three 90 minute sessions.

**Please note that a \$50 fee will be charged if less than 24 hours notice is given for cancellation of session appointments.

ENHANCE session

\$120† (inc GST) for a one-hour session.

†Please note that a \$25 fee will be charged if less than 24 hours notice is given for cancellation of session appointments.



Registration Form

To register for a course, please complete this form and email, fax or post to:

Email: marriageeducation@catholiccare.org.au
Phone: 02 4979 1370 Fax: 02 4979 1379

Postal address:

CatholicCare Social Services Hunter-Manning
Marriage Education
PO Box 759 Newcastle NSW 2300

Personal details

Bride's name: Groom's name:

Contact address:

Email (B): Email (G):

Home phone: Mobile (B): Mobile (G):

Date of wedding: Place of wedding:

Priest/Celebrant:

Note any special needs/disability/requirements for catering:

Group course preference: 1st choice #: 2nd choice #:

Payment details

I have enclosed a cheque/money order payable to 'CatholicCare Social Services Hunter-Manning'.

I wish to pay by credit card

Name on card

Card number

Expiry date ____ / ____ Visa Mastercard

Authorised signature

I have paid by direct deposit

Acc name: Centacare Maintenance Account

BSB: 062-815 **Acc number:** 00910880

Description: Please enter your surnames and course number as the transaction description.



**Social Services
Hunter-Manning**
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