

Marriage and Relationship Education



2020 Dates

'Before We Say I Do' Group Sessions: Friday evenings 5pm-9pm and Saturdays 9am-5pm

- ▶ Course 1/20: 14 & 15 February Newcastle Toohey Room
- ▶ Course 2/20: 15 & 16 May Newcastle Toohey Room
- ▶ Course 3/20: 21 & 22 August Newcastle Toohey Room
- ▶ Course 4/20: 6 & 7 November Newcastle Toohey Room

FOCCUS Prepare/Enrich Group, Three Tuesday Evening Sessions, Newcastle Toohey Room – 5.15pm-7.15pm

- ▶ Group 1: 3 & 10 March (Session 3 to be confirmed)
- ▶ Group 2: 21 & 28 July (Session 3 to be confirmed)
- ▶ Group 3: 13 & 20 October (Session 3 to be confirmed)

Registration 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 workshop date.

FOCCUS Prepare/Enrich Group Session

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

FOCCUS Prepare/Enrich Individual Session

\$420** (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.

* All prices shown are correct at time of printing November 2018 and may change without notice.



Registration Form

To register for a workshop, 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

Partner 1:..... Partner 2:.....

Contact address:

Email (1):..... Email (2):.....

Home phone:..... Mobile (1):..... Mobile (2):.....

Date of wedding:..... Place of wedding:.....

Priest/Celebrant:.....

Note any special needs/disability/requirements for catering:.....

Group workshop 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

Account name: Centacare Maintenance Account

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

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



**Social Services
Hunter-Manning**
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