

Coping With Divorce Registration Form

NAME _____ SEX _____ AGE _____

ADDRESS _____ HOME PHONE _____

CITY _____ ZIP _____ WORK PHONE _____

EMAIL ADDRESS _____ BIRTH DATE (M/D only) _____

AGES OF CHILDREN _____ How long were you married? _____

How long have you been physically separated? _____ How did you learn about us? _____

- I am enclosing \$120 for the ten week seminar
- \$100 if received 10 days prior to beginning of seminar
- I am an alumnus enclosing \$60

Questions? call Tom Flemming at 269-324-0003

PRE-REGISTRATION IS ENCOURAGED

Make check payable to **FULL CIRCLE COMMUNITY** and mail to:

Full Circle Community
c/o Tom Flemming
103 Inverness
Kalamazoo, MI 49006