

# DivorceCare Weekly Group

At Cornerstone EPC

Sessions on Tuesdays 7-9pm  
September thru November  
or January thru March

Please complete and return to the address at the bottom:

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Male/Female

Address \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please circle your age: <30    30-39    40-49    50+

Email \_\_\_\_\_

No. of years of Marriage #1 \_\_\_\_\_ No. of years of Marriage #2 \_\_\_\_\_

Is your divorce final? (Y / N) If yes, date when final \_\_\_\_\_

Have you previously participated in a divorce recovery

program? (Y/N) When/where? \_\_\_\_\_

If children in the home, what are their ages? \_\_\_\_\_

Is childcare desired? (Y/N)

If yes, circle the ages above that need childcare

For questions specifically about DivorceCare call 810-494-4034

Cornerstone EPC • 9455 Hilton Rd. • Brighton, MI 48116 •  
[www.cornerstoneforlife.com](http://www.cornerstoneforlife.com) • 810-227-9411

**“Even if you have doubts about attending, just go.”**

DIVORCE *Care*