

**Mandated 4-hour
Divorce Class Schedule
Inside**

REGIONAL MENTAL HEALTH CENTER
DIVORCE EDUCATION
8555 14th Street
Merrillville, IN 46410
RETURN SERVICE REQUESTED

DIVORCE EDUCATION

Families and Divorce....

Working It Out

A class for divorcing parents

2017

January - December



As required by Lake Superior Court Civil Division
Lake County, Indiana

Presented by Regional Mental Health Center

About Families and Divorce: Working It Out

This four-hour educational program is designed to help families through a sometimes difficult transition. Learning how to work out problems in the best interest of the children is the primary goal of the program. WORKING IT OUT is a very practical approach to solving problems BEFORE they become too overwhelming. Topics include:

- Families and the divorcing process
- Effects of divorce on children and family relationships
- Facing a change
- Practical tips for parenting through divorce
- Visits and parenting schedules from a child's viewpoint
- Talking care of your needs and your child's needs
- Getting help through community resources

The class is facilitated by professionals from RMHC who have experience working with families in transition. You will receive a handbook so that you can later refer to information you learned.

Pre-Registration:

Advance Registration Required

Attendance of both parents is required by the Civil Division of the Lake Superior Court within 60 (sixty) days of filing for divorce for parents of children under 18. Enroll in one of the classes offered at two locations. **Pre-registration by phone is required to assure your place.** Arrive at least 15 minutes before it starts to check-in. To register, call RMHC in Merrillville (736-7271).

- You should attend the class you have chosen as your first choice. No confirmation will be sent unless there's a change.
 - Listen to W/OB Radio in Hammond or WZVN (1230 AM, 107.1 FM) for cancellations due to weather.
 - Child care is not provided. **Do not bring children to class.**
 - Limited class size — reservations are accepted on a first come, first serve basis until the class fills. Pre-register soon.
 - There will be no refunds for cancellation notices received 30 days after the registered class meets.
- After attending the entire class, you will receive a certificate and the court will be informed of your attendance.

Families and Divorce: Working It Out
Schedule of Classes, Time, Locations & Payment

The cost of the class is \$50.00 for each person attending. Cash or money order are the only two forms of payment accepted. DO NOT mail cash. Make your money order payable to Regional Mental Health Center. You may send your registration and money order to the addresses below.

Class Locations & Addresses
Regional Mental Health Center — Regional Mental Health Center
3903 Indianapolis Blvd. — 8555 Taft St. (Ind 55)
East Chicago, IN 46312-2555 — Merrillville, IN 46410-6199
(219) 736-7271

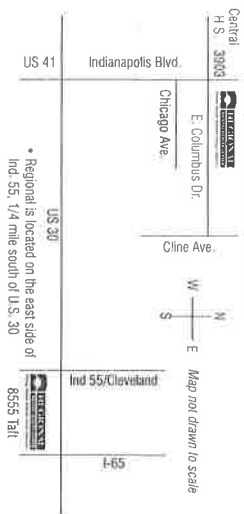
*MER means class meets at RMHC in Merrillville.
*EC means class meets at RMHC in East Chicago.

January-December 2017

MER Wed.	Jan. 4,	6 pm-10 pm	MER Wed.	July 5	6:00 pm
EC Thurs.	Jan. 19	6:00 pm	EC Thurs.	July 20	6:00 pm
MER Wed.	Feb. 1	6:00 pm	MER Wed.	Aug. 2	6:00 pm
EC Thurs.	Feb. 16	6:00 pm	EC Thurs.	Aug. 17	6:00 pm
MER Wed.	March 1	6:00 pm	MER Wed.	Sept. 5	6:00 pm
EC Thurs.	March 16	6:00 pm	EC Thurs.	Sept. 21	6:00 pm
MER Wed.	April 5	6:00 pm	MER Wed.	Oct. 4	6:00 pm
EC Thurs.	April 20	6:00 pm	EC Thurs.	Oct. 19	6:00 pm
MER Wed.	May 3	6:00 pm	MER Wed.	Nov. 1	6:00 pm
EC Thurs.	May 18	6:00 pm	EC Thurs.	Nov. 16	6:00 pm
MER Wed.	June 7	6:00 pm	MER Wed.	Dec. 6	6:00 pm
EC Thurs.	June 15	6:00 pm	EC Thurs.	Dec. 21	6:00 pm

To register or for information call between 8 am-4 pm, M-F

* Regional is located on the east side of Indianapolis Blvd., 1/4 mile north of East Columbus Dr.



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Registration for Families and Divorce: Working It Out
A class for divorcing parents

Pre-Registration Required

Name _____

Daytime Phone _____ Evening Phone _____

Cause Number _____
(Cause number required before the class to prepare certificate.)

Court/Judge's Name _____

Select Class Date and Location 1st Choice (Refer to calendar) _____

____ I prefer not to attend the same class as my former spouse. Please notify me if _____ (name) is registered for the same class.

Make money order or certified check for \$50 for each person attending payable to Regional Mental Health and mail to—
Regional Mental Health Center
Divorce Education
8555 Taft St.
Merrillville, IN 46410-6199