

Separation and Divorce Group Registration

Complete the form below and send it with payment in full to:

Christine Belaire, Ph.D.
5536-C Superior Dr.
Baton Rouge, LA 70816

Name: _____

Sex: M F Age: _____ Race: _____

Address: _____

Phone: Home: _____ Work: _____

Cell: _____ E-mail: _____

Can I contact you by e-mail? _____

Are you separated or divorced? _____

How long? _____

Are you re-married? _____ How long? _____

What is the level of conflict between you and your former spouse? _____

List names and ages of your children (note if the children are from different marriages):

What are the goals you wish to accomplish during the group? _____
