Communicating with Teens Course

- influence your teenager’s behaviour
- understand the stages of development of teenagers
- feel more comfortable with your teenager’s highs and lows
- keep lines of communication open between you and your teenager
- cope with your own and your teenager’s anger in a constructive way
- learn how to get your point across and also listen to your teenager’s point of view
- learn how to resolve “issues” between your teenager and yourself and still keep the relationship intact
- …… plus more ideas on how to build relationships - what works and what doesn’t work!

COURSE VENUE: CHATSWOOD 5wks/2.5hrs
When: Monday, 20th August, 2012  (7.00pm - 9.30pm)
COST: $150 per person  Concession: $125 per person

Dealing With Teen’s Back Chat Workshop
VENUE: CHATSWOOD
When: Monday, 13th August, 2012 - 7.00pm – 9.30pm - $40 per person

Triple P (PPP) Teens Seminar Series
available on request – to organise these or for details of Workshops/Seminars scheduled for this term, phone 9887-5830

TO ENROL, PLEASE COMPLETE THIS FORM  
(Teens – Term 3)

Family Name: ......................................................  First Name(s): ......................................................
Address: ......................................................................  Suburb: ............................................................  Postcode: ...........................
Phone: (h)…………………..(mobile)………………..…………..  □ M  □ F  (Please tick) Ages of children: .............................
Email address: ........................................................................................................................................

COURSE □  WORKSHOP □

CONCESSION CARD NUMBER MUST BE QUOTED IN ORDER TO RECEIVE CONCESSION.  Concession No. ………………………………………………………………
NSCCH employees ONLY:  (20% discount)  Department & Hospital ..........................................................
Pay Money Order/Cheques to ‘Northern Local Health Network’ and post to:  Child & Adolescent Parenting, PO Box 142,  North Ryde 1670  OR  fax 9887 2941.
Credit Card:  ......................................................  Master Card  □  Visa Card  □  AMOUNT: $
.....................................................................................................................................................  Expiry Date  □
Cardholder's Name: (printed) ........................................................................................................................................
Cardholder’s Signature: ........................................................................................................................................

Enquiries: Child & Adolescent Parenting - 9887 5830