

easierbirth
HypnoBirthing



BOOKING FORM

Mother's Information

Name: _____

Address: _____

Telephone number/s: _____

E-mail: _____

Birth Companion's Details

Name: _____

Address: _____

Telephone number/s: _____

E-mail: _____

Relationship to Mother: _____

Estimated Due Date: _____

Is this your first baby? _____

Please specify course dates that you wish to book for: _____

Any other relevant information _____

(Please continue overleaf if necessary)

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BOOKING FORM Contd.

Total cost of the course is £230, (£350 for individual tuition) which includes your HypnoBirthing book, folder containing additional information and hypnosis scripts, your Rainbow Relaxation CD, and your Comfort Zone relaxation CD.

To secure your place on the course, please return this form, along with either a deposit of £80, (balance to be paid prior to first HypnoBirthing class) or the total amount of £230 / £350.

Please make your cheque payable to Wendy Nichols.

Cheque enclosed for £80 / £230 /£350

Please return to:

**Wendy Nichols
easierbirth
21 Trowels Lane
Derby
DE22 3LS**

Tel: 01332 201767 or 07875 415264

For bookings taken between July 30th 2008 and August 30th 2008 please post completed booking form and deposit to:

**Gina Hinks
The Bridge Centre for Natural Health
185 Ladybank Road
Mickleover
Derby
DE3 0QL**

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Enrolment Agreement;

I hereby state that I am enrolling in the **HypnoBirthing®** class of my own free will and with the understanding that this is a program designed to teach me to use my own natural abilities to bring my mind and my body into a state of relaxation. I further understand that the content of these classes is in no way intended to be represented as medical advice nor as a prescription for medical procedure. I am aware that I should seek the advice of a health-care provider to answer any health-related or pregnancy-related issues surrounding my pregnancy, my labour, or my birth.

I therefore agree that I will in no way hold the instructor of the **HypnoBirthing®** classes, or the **HypnoBirthing Institute®**, its owner, or its representatives responsible for any special circumstances that could arise as a result of my pregnancy, my labour, or the birth of my child; and I agree that neither I nor any member of my family will make any claim or initiate any suit against any of the above-named parties now or at any time in the future.

Mother's Signature

Date

Birth Companion's Signature

Date