

CLASS REGISTRATION FORM

Please Print Clearly (complete both sides)

Today's date _____

NAME _____

MAILING ADDRESS _____

PHONE _____ EMAIL _____

Can you receive text messages? Yes/No

I would like the email monthly newsletter with updates on services & links to parenting articles yes / no

Will you be brining your partner or support person to class? Yes / No

Check all that apply:

_____ I am pregnant & my due date is _____

_____ This is my first baby _____ I plan to breastfeed

_____ My baby's birth date is _____

Which hospital are you delivering at (or did delivered at) _____

_____ My baby was premature or spent time in the NICU

I have other children ages _____

CHECK WHICH CLASSES BELOW YOU ARE REGISTERING FOR- WRITE THE START DATE of class requested

*Office Use
Only amt pd*

___ Childbirth 3 Part Series _____

___ Childbirth All Day Saturday Crash Course _____

___ Childbirth Virtual Self=Paced Class _____

___ Breastfeeding Class _____

___ Newborn Care Class _____

___ Planned C=Section Class _____

___ Postpartum Planning Class _____

___ Grandparenting Class _____

___ Baby Calming Strategies _____

I am registering for the following FREE Class/Classes: Write the dates requested

____ Dad's #1 _____

____ Dad's #2 _____

____ Pregnancy Class _____

____ Parent Massage Training/Orientation Class _____

____ I plan to attend the monthly Pregnancy Support Group meeting beginning (which month)_____

____ I plan to attend the monthly Postpartum Parenting Support Group beginning(which month)_____

If you are registering for the Sibling Class or the Infant Massage hands on classes, request the form for those classes.

READ AND SIGN BACK PAGE AND RETURN TO HAPPY BABY SECRETS OFFICE, WITH PAYMENT BEFORE FIRST CLASS DATE

I acknowledge, as a parent I am responsible for decisions of my family and I do not hold Happy Baby Secrets staff responsible for the care and wellbeing of my family. I also understand that Happy Baby Secrets is NOT a medical or healthcare facility and therefore does not offer medical advice. Any medical questions should be directed to my personal healthcare provider and NOT Happy Baby Secrets, Center For Touch or its staff.

I understand that Happy Baby Secrets is an educational resource providing information on pregnancy, information about how to nurture and bond with my baby and prepare me for childbirth, breastfeeding & the postpartum period.

Payment and registration is required prior to the first class. No refunds are made but in the event of instructor emergency or inclement weather and cancelation of a class, an alternate date and time of that missed class will be made available. Other Happy Baby Guidelines: Never Ever Shake A Baby, Always Always place a baby on its back to sleep. When available HBS recommends the Velcro "swaddle wrap" & swaddling only as per guidelines by The American Academy of Pediatrics which parents are informed of in class. Information will be available concerning Shaken Baby Syndrome & Sudden Infant Death Syndrome.

For safety reasons, no unattended children (under age 12) allowed during any session. *This means that if you are in the infant massage class with your baby there must be another adult present to tend to any other children that you have.*

Most Prenatal Classes such as Childbirth, the cost includes the pregnant mother and 1 other person.

Signature _____ Date _____

Office Use Only:

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You may print this form or have it mailed or emailed to you.

It must be signed & returned with payment before the class date in order to hold your spot.

Registration form may be mailed to (and make check to)

Lorie Cox

3307 Boettcher

Kilgore, TX 75662

Or emailed to happybabysecrets@yahoo.com (remember to scan and send both sides)

Or you may slip it in the door drop box in the office door at the Tyler location. This is in the Woodgate 1 Building at the following address:

1121 South Southeast Loop 323 Suite 217

Tyler, TX