

# The Birth You Want: Planning for Natural Childbirth Registration

Your Name: \_\_\_\_\_

Partner's Name: \_\_\_\_\_

Will your partner be attending class? \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home, work, cell—best way to find you numbers): \_\_\_\_\_

Email address: \_\_\_\_\_

Your estimated due date: \_\_\_\_\_

Is this your first child? \_\_\_\_\_

Where are you intending to give birth?    Hospital    Home    Undecided

Have you attended a birth before? \_\_\_\_\_

Anything else you'd like us to know? \_\_\_\_\_

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Include a \$175 check or money order made out to:

Monica Liddle  
31 W. Superior St.  
Suite 503  
Duluth, MN 55802

Call Monica @ 428-0338

Or

Jana @ 340-2108

if you'd like to make payment arrangements.

Thanks!