



# Confident Birthing Class Registration

Please identify class session DAYS AND DATES for which you are enrolling:  
Monday OR Tuesday evenings (circle one). Class Session dates: \_\_\_\_\_

Your name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Occupation: \_\_\_\_\_

Age: \_\_\_\_\_

Partner/Support Person's Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ His/Her Occupation: \_\_\_\_\_

Your Midwife/Doctor: \_\_\_\_\_

Due Date: \_\_\_\_\_ Number of previous births: \_\_\_\_\_

Birth location: \_\_\_\_\_ Children at home: \_\_\_\_\_

Enclose:  \$75. Deposit. **The balance of \$140.00 is due two weeks prior to the first class.**  
**Please mark your calendar with the date the balance is due & note it here:** \_\_\_\_\_

\$215. Tuition-in-full (CLASS NOW INCLUDES A COMPLETE  
BREASTFEEDING CLASS with Lactation Consultant, Lynnelle King, IBCLC

## Make checks payable to: Kyndal May

To ensure a place in the class you may send tuition-in-full OR a \$75.00 **non-refundable** reservation deposit.  
Deposit is applied to tuition and an invoice will be sent to you for the balance due.

You may also email this completed registration form to me at [Kyndal@babybumpservices.com](mailto:Kyndal@babybumpservices.com) and I will send an electronic invoice to you so that you may pay the tuition online via Square. Once the invoice is paid, I will add you to the roster and send you a confirmation.

A \$20.00 per class refund is available if 4 or more classes are missed *for medical reasons*.

Please sign below and return this document with your deposit or full tuition.

Signed \_\_\_\_\_ Date \_\_\_\_\_

## Please send your check with this form to:

Kyndal May/Baby Bump Services  
1471 N. Mansfield Place Eagle, ID 83616

Please tell me ... how did you hear about **confident birthing**?