



Childbirth Education Retreat—one weekend on a Friday evening and Saturday Day
For upcoming dates, check out our calendar on our website or call us.

Contact: Office Phone: 604-535-1175 Fax: 604-648-9791 info@crescentmoonchildbirth.org

Clinic Location: Upstairs (entrance around right side of the coach house) at 201-2775 McKenzie Ave (at Beecher) in Crescent Beach.

Parking: Street parking.

What your registration fee includes:

This package includes an optional early pregnancy class, the retreat, a reunion class, free drop-in breastfeeding/new parenting sessions, and a free drop-in card for Semiahmoo Family Place—for a value of over \$350. We are able to offer scholarships to families with reduced incomes.

Classes are facilitated by Laurel Tien, Registered Nurse, Certified ICEA Childbirth Educator, Lactation Consultant, and Midwifery Student.

What to bring: Pillow, pen or pencil, and copy of Baby's Best Chance (if you have one). On Saturday, please bring a bagged lunch and water bottle.

Friday evening 7pm to 9:30pm: We will cover introductions, third trimester issues, and normal birth, including comfort measures.

Saturday 10am to 4pm: We will cover birth variations, breastfeeding, and life with baby.

Reunion Class: After all of the families have had their babies, we will have a final class to meet everyone and hear about your 'birth-days'.

Refund and Cancellation Policy: You will receive a full refund if you provide notification 10 days prior to the first class. No refunds are available after class has begun, however full refunds will be given to those who give birth prematurely or experience a miscarriage and are therefore unable to attend any part of the classes. There is a \$10 processing fee for all refunds. CMCS reserves the right to cancel classes due to low enrollment. If your class is cancelled for this reason, you will be notified and given the opportunity to sign up for the next available session. In the event of course disruptions, beyond the control of Crescent Moon Childbirth resulting in course cancellation, fees will be refunded on a pro-rated basis depending on the number of classes scheduled before the disruption began.



SEMIAHMDO
FAMILY PLACE
Registration Form

Dates of the class you would like to attend: _____

Name: _____

Address: _____ Postal Code: _____

Phone Number: _____ Email address: _____

Husband/Partner/Labour Support _____

Phone Number: _____ Email address: _____

Is this your first pregnancy? ? yes ? no

Do you have children? ? yes ? no If yes, their ages? _____

Are you carrying multiples? _____

Where do you plan to give birth? _____

What is (are) the name(s) of your primary prenatal healthcare provider(s)?

What week are you in, and what is your estimated due date? _____

How you are feeling about your pregnancy and parenting right now? _____

How did you hear about us? _____

What books have you read, or are planning to read? _____

Is there anything else that you would like your childbirth educator to know? _____

Checklist (for your convenience)

1. To register, please call 604-535-1175 to confirm the date you want is still available.
2. Ensure your cheque is made out to *Crescent Moon Childbirth Services*. You may also pay by credit card at 604-535-1175.
3. Please return this registration form to:

**Crescent Moon Childbirth Services,
201-2775 McKenzie Ave,
Surrey, BC V4A 3H5**

**Or via email to info@crescentmoonchildbirth.org
Or by fax 604-648-9791**

Thank you for sharing your birth experience with us!