



Wonderfully Made
CLASS REGISTRATION FORM

Instructions:

To register, please complete this form and mail in with your class fee to secure your space in class. Please send registration form and check to; Cheryl Anderson 18001 124 St. SE Snohomish, WA 98290

Mom's name _____

Dad's name _____

Due Date _____

Address _____

City _____ State _____ Zip _____

Email address _____

Phone 1 (____) _____ Phone 2 (____) _____

Is this your first child? Yes No

Who is your midwife or doctor? _____

Where are you planning to have your baby? _____

How did you hear about this workshop? _____

Anything else you'd like us to know? _____

Childbirth Preparation Classes (Please Select Your Class):

- Six Childbirth Education Class \$150
- One Day Birth Class \$75
- Breastfeeding and Newborn Care \$50

