

Body-Mind Wellness

at Healing Hands Chiropractic

Prenatal Yoga / Pregnancy & Childbirth Education Student Consent Form

1. Regular, quality prenatal care is important for a healthy pregnancy. I understand that Prenatal Yoga and/or Pregnancy & Childbirth Classes are intended as a supplement to, and not a replacement for, prenatal care with a midwife or OB/GYN.

2. I understand that I, as the parent, am chiefly responsible for my own and my child's health and well-being before, during, and after pregnancy. Because pregnancy is time of constant change, I will notify the instructor of any specific concerns or pertinent changes as my pregnancy progresses.

3. (*Prenatal Yoga students only*) I have received permission from my care provider to participate in a prenatal exercise program.

Mother's Signature

Date

Mother's Name (printed)

Estimated Due Date