

Pre-birth Program Registration Form - 2009

Please complete this form and return to Mission Hospital, Community Health Improvement Services (CHIS)

Expectant Mother's Name		Birth Date	Support Person(s) Name (Attending classes with you)	
Street Address		City		Zip Code
Home Phone		Daytime Phone (if different)		Email:
Due Date or Delivery Date	Is this a Multiple or High Risk Pregnancy? Yes No Risk Factor:	Doctor's Name:		Insurance

Registration Information

- 1) Fax your registration with credit card information to (949) 364-4903
 - 2) Send your registration (with payment) to: Mission Hospital - CHIS, 27800 Medical Center Road – Ste 340, Mission Viejo, 92691
 - 3) Bring your registration form to the Community Health Improvement Services office located at the address above. Monday – Friday, 8 a.m. – 4 p.m.
- Refunds given only with a two week notice (TotSaver is non-refundable). Returned checks have a \$10 processing fee. Confirmation will be sent. If you have any questions about registration, call (949) 364-1770**

Pre-birth Programs Desired (July – December). Please check the square next to your preferred date.

Open House

Thursdays, 6 – 7:30 p.m. - *FREE*

- Jul 9 Sep 10 Nov 12
 Aug 13 Oct 8 Dec 10

Preparation for Birth

(Three-week series or Super Weekend session - \$95 per couple)

Tuesdays, 6 – 8:30 p.m.

- Jul 14, 21, 28 Oct 6, 13, 20
 Aug 25, Sep 1, 8 Oct 27, Nov 3, 10
 Sep 15, 22, 29 Nov 17, 24, Dec 8

Friday, 6 – 8:30 p.m. and Saturday, 9 a.m. – 12 p.m.

- Jul 17, 18 Sep 18, 19 Nov 13, 14
 Aug 14, 15 Oct 16, 17 Dec 11, 12

Prenatal Breastfeeding

Saturday, 9 – 11:30 a.m. - \$30 per couple

- Jul 18 Sept 19 Nov 7
 Aug 8 Oct 10 Dec 12

Baby Care Basics & Beyond

Monday, 6 – 8:30 p.m. - \$30 per couple

- Jul 27 Sep 28 Nov 16
 Aug 24 Oct 26 Dec 14

Saturday, 9 – 11:30 a.m.

- Jul 11 Sep 12 Nov 7
 Aug 1 Oct 3 Dec 5

Transition to Parenthood

Monday, 6 – 8 p.m. - \$40 per couple

- Sep 21 Dec 7

TotSaver

(Two-week series or One Saturday session - \$30 per person; must be 16 years or older)

Wednesdays, 6 – 8:30 p.m.

- Jul 22, 29 Sep 23, 30 Nov 4, 11
 Aug 19, 26 Oct 21, 28 Dec 9, 16

Saturday, 9 a.m. – 3 p.m.

- Jul 25 Sep 26 Nov 14
 Aug 29 Oct 10 Dec 19

Sibling Class

Saturday, 9 – 10:15 a.m., ages 3-10 - \$25 up to two children; \$30 for three or more

- Jul 25 Sep 26 Nov 21
 Aug 22 Oct 24 Dec 19

Grandparents in the Know

Saturday, 9 – 11:30 a.m. - \$15 per person or \$25 per couple

- Aug 8 Oct 24 Dec 12

Boot Camp for New Dads

Saturday, 10 a.m. – 12 p.m. - *FREE*

- Jul 11 Sep 12 Nov 7
 Aug 1 Oct 3 Dec 5

Payment Method: Check or Money Order Enclosed (Payable to Mission Hospital) **or** Charge to my: Visa/MC/AMEX/Discover

Credit Card #: _____ **Exp. (MM/YY):** _____

Amount to be Charged: _____

Card Holder's Name (Print): _____

Signature: _____ **Date:** _____