



Childbirth Education Associates of Tallahassee

*"Family Centered
Maternity Care"*

*P.O.Box 14321, Tallahassee, FL 32317
www.tallychildbirthclass.com*

We are a partnership of Nationally Certified Childbirth Educators offering childbirth preparation classes intended to fully prepare you for your entire birth experience. Conveniently held in your doctor's office waiting room at North Florida Women's Care, these classes are offered various evenings Monday through Thursday. We also offer a 2 day "Super" held on a Friday evening and Saturday 9-5pm. Except for the weekend super class, each childbirth prep class is held one evening per week for 4-5 weeks, approximately 2 ½ hours per class. Families wishing to take a refresher class for second (or beyond) pregnancies are welcome to attend our classes including our two day "SUPER" classes.

We invite you to visit our web page at www.tallychildbirthclass.com for more information about our classes. On the web page you will find class info, class schedules, educator information, and **online registration**. To register via the internet, please visit our online registration page. For mailed registration forms, please complete the form below being sure to indicate any night(s) of the week you CANNOT attend. Please fill out all information completely. We will call you if there is any question or class conflict with your preferences. Make sure to attach a check or money order made out to "Childbirth Education Associates" with the corresponding fee. Credit Cards are accepted for online registrations only. For mail registration please detach the registration form and mail the completed form with your payment to: **P.O. Box 14321, Tallahassee, FL 32317-4321**

Phone- 850-559-6797

Web address- www.tallychildbirthclass.com

Email address- tallychildbirthclass@gmail.com

We strongly recommend early registration for classes, preferably by your 4th month of pregnancy as our classes fill up very quickly. A confirmation letter and receipt will be mailed to you after we receive your registration form and payment. Capital Health Plan will provide a partial reimbursement to CHP members for these classes once you mail a copy of your receipt to their claims department after your class begins. Refund policy: If you cancel your registration, refunds will only be given if we can replace you in a class. There is a \$20 non-refundable cancellation fee.

Thank you and we look forward to working with you,

Beth Dye, ICCE - Kathy Tafuri, RN, LCCE - Heidi Chavers, RNC, LCCE - Melissa Harley, LCCE, CD

Please clip along dotted line below (Retain upper portion for your records)

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Registration Form (check one)

Prepared Childbirth Education Classes \$110(4-5 wks)

Prepared Childbirth Education Classes \$110(2 days weekend class)

Your Name: _____ Doctor's Name: _____

Partner's Name: _____ Due date(required): _____

E-Mail address: _____ CHP Member? (check one) YES NO

Mailing/Billing address (include Zip code): _____

Home phone: _____ Work phone: _____ Cell Phone: _____

Are there any nights (M, T, W, Th) that are inconvenient? Please list _____

Credit cards accepted through our web page-www.tallychildbirthclass.com

OFFICE USE ONLY

Class dates _____

Payment date _____

Instructor _____

Confirm date _____

Registration Number _____

Receipt # _____