

Tracey Berry

253-720-3293

thebellydancedoula@gmail.com

# Doula Contract

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_, have discussed and reviewed our wishes with our Doula.

I understand that planning for our baby’s birth may not go as I imagine or plan, but that everyone involved with this contract will do everything within our power to fulfill the obligations of this contract.

I understand that Tracey Berry is not working for the hospital or midwife, but is hired by me to meet my needs.

# Limitations on Services

I understand that Tracey Berry is not here to make decisions or to enforce our decisions, but to help me know my options and encourage me to enforce my own decisions.

I understand that she will not perform any medical procedures, including but not limited to: vaginal exams, fetal heart tones, blood pressure readings, etc.

I understand that Tracey Berry will provide emotional and physical support to both my labor partner (spouse, mother, etc.) and to me.

I understand that I have the right to refuse any of the services Tracey Berry offers.

# Services Provided

I understand that Tracey Berry will come to our home for a minimum of two prenatal visits, unless other arrangements are made and agreed to by all parties involved.

I understand that Tracey Berry will be accessible by telephone for any questions or concerns twenty-four hours a day, seven days a week.

I understand that Tracey Berry will come to the location that I choose (usually home or hospital) to provide labor support as soon as I request it.

I understand that Tracey Berry will remain with us, once active labor begins until one hour after birth, to serve and give sense of security.

I understand that Tracey Berry will strive to maintain a calm and peaceful environment in the labor and delivery setting.

I understand that Tracey Berry will visit our home one to two weeks after the birth to review our birth story and provide emotional support.

I understand that Tracey Berry’s services terminate six weeks after the birth of my baby and that at that time, any unfulfilled terms of this contract will be deemed complete.

# Doula Obligations

I understand that unanticipated emergency circumstances may prevent Tracey Berry from attending our birth.

I understand that in that circumstance, another qualified Doula will attend the birth. Arrangements can be made to meet the backup if requested.

# Client Obligations

I will keep Tracey Berry apprised of any changes in our situation, such as health changes or change of residence/hospital, prior to labor and delivery.

I agree to call Tracey Berry when the first sign of labor begin, so that she can make arrangements to attend our birth.

I understand that Tracey Berry requires 60 to 90 minutes for travel time, so it is important to call her as soon as possible.

# Refunds

I understand that after I sign this contract I may choose to not have Tracey Berry attend my birth; however, I will forfeit the deposit and I will be responsible for any outstanding fees owed under this contract.

I understand that Tracey Berry will make every effort to attend my birth and fulfill the obligations of this contract. Tracey Berry may not be able to attend my birth in the event of unforeseen events such as but not limited to: rapid labor, failure to call, or a cesarean section. If failure to attend the birth is due to unforeseen circumstances, payment for Tracey Berry’s services will not be returned and any outstanding fees for this contract will be owed to her.

I understand that if Tracey Berry is not able to attend my birth due to her own error, she will find a replacement Doula or refund the full fees due under this contract; at her discretion.

I understand Tracey Berry’s role during labor and birth, she will not perform any tasks outside of this contract, such as medical procedures, and I will not ask her to.

# Fees

My fees for the services described here are $400. A non-refundable deposit of $75 is due upon signing this contract. A further fee of $100 is to be paid one month (37 weeks) before the mother’s due date. A final payment of $225 is to be paid at the first postpartum visit, unless other arrangements are made.

I have read this letter of agreement describing the doula’s services and agree that it reflects the discussions that I have had with her. All questions have been answered to my satisfaction. I agree to the terms of services and payment of fees outlined above.

Client\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Doula\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_