

Workshop Registration Form

Please complete the form and send it to [hibbardcounseling@gmail.com](mailto:hibbardcounseling@gmail.com)  
If you do not have access to a scanner, please send an email with these questions with answers listed.

Name: \_\_\_\_\_

Spouse: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Due Date: \_\_\_\_\_ I am not currently pregnant \_\_\_\_\_

Class Date: \_\_\_\_\_

How did you hear about this workshop? \_\_\_\_\_

I have made payment through the pay-pal option on the website: yes \_\_\_\_\_ no \_\_\_\_\_

If you have any specific questions you would like answered or have a specific situation you are anticipating upon the arrival of your baby and would like to cover it during the workshop, please write it in the space below.

---

---

---

---