



### Doula / Client Agreement

<b>Primary Doula:</b> Deanna Dawson-Jesus		<b>Cell #:</b> (925) 216-7264 <b>Email:</b> Deanna@BirthingBabies.info
<b>Doula Apprentice OK (circle one):</b> Yes      No (No additional fee)	<b>Other Birth Attendees:</b>	
<b>Client Name:</b>	<b>Partner(s) Name(s):</b>	<b>Estimated Due Date:</b>
<b>Pronouns:</b>	<b>Pronouns:</b>	<b>Partner Alternate #</b>
<b>Cell #:</b>	<b>Cell #:</b>	
<b>Email:</b>	<b>Email:</b>	
<b>Client Address:</b>	<b>Delivery Location:</b>	<b>Care Provider Name &amp; #:</b>

I completed a Doula Certification Training through Childbirth Education Specialists on September 16, 2002, and again with Carol Shattuck-Rice in 2013. I was awarded a Labor Doula Certificate by DONA on October 20<sup>th</sup>, 2003. I was recertified in 2007, 2015, and again in 2018.

**Select one of the following packages (Initial Please):**

	<b>ESSENTIAL</b> ___	<b>PREMIER</b> ___	<b>CONCIERGE</b> ___
<b>Fee (Due at 1<sup>st</sup> Prenatal)</b>	\$3,100.00	\$5,500.00	\$10,000.00
<b>Total number of contracted clients during your birth month (Includes this contract)</b>	No more than two	No more than two	One
<b>On-Call Time (Before EDD/After EDD)</b>	2 weeks/6 weeks	2 weeks/12 weeks	2 weeks/26 weeks
<b>Phone/Text/Email Support</b>	24/7 from contract signing to six weeks postpartum.	24/7 from contract signing through 12 weeks postpartum	24/7 from contract signing up to 6 months postpartum. (excludes vacations)
<b>Prenatal Appointments</b>	Three (Four during pandemic)	1/Month until 36 weeks, then 1/week until birth	Up to 2/month as needed until 36 weeks, then 1/week until birth
<b>Birth Ball that you keep</b>	Included	Included	Included
<b>Scheduled Postpartum Doula Services</b>	None (Can be hired hourly with separate contract)	40 Scheduled Hours (Additional hours under a separate contract)	80 Scheduled Hours (Additional hours under a separate contract)
<b>Birth and Postpartum Plan Counseling</b>	Included	Included	Included
<b>Labor Support at Home</b>	Per client request	Per client request	Per client request
<b>Sibling Doula Services</b>	No	No	Included
<b>Birth Timeline, delivered at our final postpartum appointment</b>	Included	Included	Included
<b>Breastfeeding Support</b>	Included	Included	Included
<b>Childbirth Education Class</b>	No	No	Included
<b>Newborn Care Class</b>	No	No	Included
<b>Breastfeeding Class</b>	No	No	Included
<b>Placenta Encapsulation</b>	No	No	Included
<b>Willing to Travel (Outside SF Bay Area)</b>	No	Yes (Expenses and Daily Stipend Paid by client)	Yes (Expenses and Daily Stipend Paid by client)



**My Services will NOT include (Scope of Practice):**

- Making decisions for you, although using my education and experience, I may assist with information.
- Performing clinical/medical tasks such as fetal heart tone checks or vaginal exams.
- Communicating with medical staff directly on your behalf. It will be your responsibility to inform the staff about your decisions. However, I may assist you by asking appropriate questions.
- **NOTE - Please contact me after every prenatal appointment(s) with your care provider.**

**Prenatal Visits:**

- Will be arranged according to our mutual schedules and will last an average of two hours.
- Are subject to cancellation and rescheduling due to my or other clients' needs, and as we both agree.

**Postpartum Visits:**

- A postpartum visit will be scheduled at approx. six weeks after your birth. This visit will last approximately one hour and will focus on birth processing and other resources and or referrals as needed. This visit is not considered "Postpartum Doula Services (PDS)."
- Postpartum Doula Services (even those included with packages) will be handled under a separate contract. PDS will be subject to rescheduling due to Birth Support for other clients. Make-up hours will be rescheduled to fit all of our needs.

**Labor and Birth:**

***I would like you to call me at the very first sign of labor, even if it results in practice-labor.***

This enables me to make my necessary arrangements, allowing me to attend your labor as soon as possible. NOTE: When you call me, it will take me approximately one hour to get ready and leave my location. Add to that, the travel time to your location...and allow for Bay Area traffic. The sooner you notify me that labor might be happening, the sooner I can be at your location to support you. Should your labor go longer than 18 hours, I reserve the right to bring in another doula for respite help. This allows me to return to your labor with a clear mind and being capable of providing better support.

**Ability to Provide Service:**

In the event I am unable to attend your birth, it is my responsibility to provide a back-up Doula. If I fail to provide Doula Services, either personally or by sending a back-up Doula, I will refund the above fee, minus an hourly wage of \$100 for all appointments we have concluded. Appointments include in-person meetings, emails, phone calls, and texting, each contact billed for a minimum of one hour; time will also include travel and expenses. Failure to notify me of your labor status, or onset of labor will not constitute "failure to provide service" on my part.

Should you choose to terminate this contract for personal reasons I will attempt to contract another client around your estimated due date...if another client hires me I will happily offer you a refund, minus an hourly wage of \$100 for all appointments (as defined above) that we have concluded; time will also include travel and expenses. If I am unable to replace your contract with another client for any reason, a refund **will not** be provided.

**On-Call Status**

I will officially be on-call for your birth from \_\_\_\_\_ thru \_\_\_\_\_ "On-call" means I will be within three hours of your planned birthing location; this allows me to join you in labor as soon as possible.

I have scheduled prior plans and will be unavailable on the following dates: \_\_\_\_\_ through \_\_\_\_\_. Should you need a Doula on these dates, please contact your primary back-up directly.

**In Conclusion**

I/We have read this Doula / Client Agreement, and have asked the necessary questions, making all items stated herein clearly understood. By signing below, I/We agree to the terms stated.

<b>Signature of Mother</b>	<b>Signature of Partner(s)</b>	<b>Date</b>
<b>Signature of Doula</b>	<b>A copy of this agreement will be provided to you upon request.</b>	<b>Date</b>