

Holistic Childbirth Classes



Lamaze Certified – *Birthing From Within* Inspired 4-week Class Series & ½ Day Workshops

THE CLASSES COVER:

- positions for labor & birth
- pain coping practices in every class
- solution-focused, not outcome-focused philosophy for birth & life!
- birth art expression – all art supplies are included in course fee
- the Spiritual Cesarean Birth
- breath and imagery practice
- a mind-body-spirit approach

SUGGESTED READING:

- Birthing From Within, Pam England
- Ina May's Guide to Childbirth, Ina May Gaskin
- The Official Lamaze Guide - Giving Birth with Confidence, Judith Lothian, Charlotte DeVries

for more information, class schedules, or to pay by
MC/VISA visit
www.birth-in-awareness.com

The course fee is **\$250 for the 4-week Series**; and **\$150 for ½ day workshop**. Registration form and a non-refundable deposit of \$100 (or payment in full for the ½ day workshop) are due 7 days before the start of the class to reserve your space. The remaining balance is due the first night of class. **Class size is limited**. Registration at the door, if space allows, is \$275 for the 4-week series; and \$175 for ½ day workshop.

Make checks payable Kelli DeFlora.

Returned checks are subject to a \$25 service charge. (No refunds will be made after registration is confirmed).

INSTRUCTORS

Laura Amerman, LCCE, CD(DONA), PCD(Birth Works),
Lamaze Certified Childbirth Educator,
Birthing From Within Level I Mentor & Certified Doula
201-390-4734 • Euterpe.Integre@gmail.com

Kelli DeFlora, RYT, CD(DONA)
Birthing From Within Level I Mentor, Certified Yoga Instructor,
Infant Massage Instructor and Certified Doula
201-259-0400 • KelliYoga@gmail.com

Holistic Childbirth Class Registration Form

Please complete and return to Kelli DeFlora, 8 James Street, Montclair, NJ 07042

Name(s) _____ Phone (Home & Cell) _____ Referred by _____

Address, City, State, ZIP _____ Email _____

What is your expected due date? _____ Where are you giving birth? _____ Who is your care provider (OB/CNM)? _____

Are you using a doula for labor support? _____ If yes, whom? _____ Need a referral? _____

Is this your first baby? _____ Please indicate which class series you would like Montclair _____ (date) Nutley _____ (date)