

## Doula/Client Agreement

The following sets forth an agreement between Sabrina C. Golebiewski (hereafter referred to as

“Doula”), \_\_\_\_\_ (hereafter referred to as “Client”), and \_\_\_\_\_

(hereafter referred to as “Client's Partner”).

### 1. SERVICES THE DOULA AGREES TO PROVIDE

Doula accompanies Client in labor to help achieve a satisfying birth experience and help Client give birth in a manner that Client desires. Doula draws on her own knowledge and experience to provide emotional support and physical comfort. Doula assists Client in gaining information needed to make informed decisions throughout her birth. Doula is self-employed and does not work for a hospital, birth site, or other health care professional.

Doula's services will, at minimum, consist of 1 (one) interview at no charge, 1 (one) prenatal visit, 24 hour/day, 7 day/week telephone support, attendance at birth, 1 (one) postpartum visit to be completed within two weeks of delivery. The interview would consist of the Client and Client's partner completing the prenatal questionnaire. This would also be a time to discuss any other concerns the Client and the Client's partner may have. This will also be a time to discuss how they might work best together.

At the interview, two copies of the Doula/Client agreement will be left with the Client. After a phone call confirming the Client has selected the aforementioned Doula, the Doula will request that the Client mail one signed copy of that agreement for private Doula services to her, along with a deposit of \$ \_\_\_\_\_ in **the form of cash or a money order** to the Doula. (Note: personal checks are not acceptable forms of payment.) A copy of the prenatal interview can be sent to the Client upon Client's request.

The prenatal visit would consist of Doula assisting Client in preparation for a birth plan if requested. We will discuss any concerns the Client or the Client's partner may have. The support check list regarding comfort measures and coping techniques will also be completed at this time. Understanding Client's priorities, Client's best coping techniques in regards to pain and fatigue, Client's preferences regarding pain management options and the use of pain medications will be discussed. At this visit, it would be a good idea to review coping techniques and comfort measures desired.

Doula agrees to meet Client within labor within two hours after receiving a call from Client requesting her presence. Doula will remain with Client through Client's labor and birth, providing appropriate comfort measures, reassurance, and doing everything reasonably possible to help Client achieve her birth desires. Doula can help initiate breastfeeding, if requested. Doula will remain with Client for up to two hours after birth unless Client is comfortable and asks Doula to leave earlier.

One postpartum visit will also be included in Doula services. This visit should take place 1-2 weeks after birth, and would consist of discussing the outcome of birth. Answering any questions or concerns the Client may have about self or baby.

## 2. SERVICES NOT PROVIDED BY DOULA

Doula will NOT make decisions for Client. Doula will help Client get information necessary to make informed decisions. Doula will not speak to hospital staff (e.g. Doctors, nurses, midwives, etc.) on Client's behalf. Doula will discuss Client's concerns and suggest options, but the Client's partner will be responsible for speaking to hospital staff. Doula does not conduct any medical procedures, or conduct vaginal exams.

## 3. RESPONSIBILITIES OF THE CLIENT AND THE CLIENT'S PARTNER

Client agrees to inform her doctor or midwife that she has hired a Doula. Client also agrees to keep in contact with Doula after each doctor or midwife visit. Client will keep Doula informed of Client's medical condition, including any test results so that the Doula may answer any questions Client may have. Client agrees to provide Doula with a copy of her birth plan. Client agrees to call Doula with onset of labor and at least 2 (two) hours before Client would like Doula to arrive at the predetermined birth site.

## 4. FAILURE OF DOULA TO PROVIDE SERVICE

Doula will make every effort to provide the services described here. If Doula fails to attend Client's birth due to preventable reasons of Doula's fault, there will be no charge for services rendered and Doula will return the deposit to Client. If Doula fails to attend Client's birth due to circumstances beyond their control, (e.g. Extremely rapid labor, restrictions by hospital staff, failure to call Doula, "Act of God", etc.), Doula will retain deposit and refund to the Client any additional payment made.

## 5. FEES

Client shall pay Doula a flat fee of \$\_\_\_\_\_ to provide the above described services. Of that amount, \$\_\_\_\_\_ has been paid upon signing this agreement and will be held as a non-refundable security deposit. The remaining balance of \$\_\_\_\_\_ is due at the postpartum visit. If Client decides to terminate this agreement before birth, the deposit will be retained by Doula, with any additional balance paid to be owed the Client.

## 6. CESAREAN SECTION POLICY

If you develop a maternal or fetal condition during pregnancy that requires you to have a scheduled cesarean section, the total fee for Doula services will be adjusted. An additional deposit in the amount of \$\_\_\_\_\_ will be due immediately, and the outstanding balance due will increase by \$\_\_\_\_\_.

If you develop a condition during your labor that requires a cesarean section to be performed, the rate of Doula services will remain as stated in section 5. Although Doula will make every effort to be present in the operating room, the final decision is made by hospital staff.

## 7. OTHER

In entering a contract for Doula services, Client and Client's Partner acknowledge that the performance of this contract may be provided to Client in Client's home, medical facility, and/or hospital. Client and Client's partner understand that the mentioned Doula has a limited role pursuant to the descriptions of tasks outlined above, wherever services are provided to the Client by the Doula. The

aforementioned Doula has not represented to Client or Client's partner that contracting for her services in any way guarantees a risk-free or emergency-free labor experience. Client and Client's Partner understand that the Doula does not make medical or nursing decisions on the Client's behalf, including the decision when to seek medical care at a hospital or when labor and delivery are attempted elsewhere. When services are provided in a medical facility, Client and Client's Partner acknowledge that the Doula is not responsible for the performance of clinical tasks to include medical or nursing decisions regarding the inclusion or exclusion of treatments available to Client and/or Client's Partner and the unborn child/children. Now, in consideration of the above acknowledgments, Client and Client's Partner jointly and separately on behalf of each of us and both of us, our heirs, administrators, personal representatives, executors and assigns to release and forever discharge our Doula from all damages or causes of action, either in law or in equity, which Client and/or Client's Partner have or acquire or which may accrue to Client and/or Client's Partner, Client and/or Client's Partner's heirs, administrators, personal representatives, executors or assigns as a result of using the Doula services of the forenamed Doula. Client and Client's Partner intend this to be a complete release and discharge of the Doula from all liability whatsoever.

#### 8. TERMINATING SERVICES

Client has the right to terminate services at anytime. However, once the deposit has been paid, it is non-refundable if the prenatal visit has been completed. If Client wishes to terminate services before the prenatal visit, Client will be entitled to a full refund.

Signature below indicates acceptance to all terms and conditions outlined herein as stated. Any change to the terms and conditions outlined herein must be completed in writing, and must be signed separately.

Client:	_____	Date: _____
Partner :	_____	Date: _____
Doula:	_____	Date: _____