



## Dunlap Family Birth Center



At Dunlap Community Hospital, we believe that care should focus on the safety and comfort of the mother and baby while providing the flexibility that encourages the involvement of the entire family. We recognize the importance of choice, participation and family support before, during and after the birth of your baby.

### **Educational Support**

Breast Feeding Classes- weeknights  
call for a schedule

Safe Sitter®, Baby Sitting Program  
Ages 11 thru 14

Infant Care (Class upon request)

Car Seat Installation Assistance by calling for an  
appointment

For more information on any of these programs call  
330.684.4739



**Dunlap**  
COMMUNITY HOSPITAL

832 South Main Street  
Orrville, Ohio 44667  
Phone: 330-682-3010  
[www.dunlaphospital.org](http://www.dunlaphospital.org)



**Dunlap**  
COMMUNITY HOSPITAL

## Lamaze Childbirth Education Program 2011





## Lamaze Childbirth Education Program 2011 Schedule

**Saturday, January 29th and February 5th**

**Saturday, April 9th and 16th**

**Saturday, May 21st and June 4th**

**Saturday, July 30th and August 13th**

**Saturday, September 24th and October 1st**

**Saturday, November 12th and 19th**

**All Classes Meet 9:00 am - 4:30 pm**



### Registration

- ◆ Register by your 7th month of pregnancy.
- ◆ Classes are limited to ten expectant mothers and one labor support person per mother.
- ◆ Classes are taught by a certified Childbirth Educator.
- ◆ Cost is \$50.00, which includes lunch and refreshments.
- ◆ Each session consists of two Saturdays. (You must attend both classes.)
- ◆ The two-week session is held in the lower level of Dunlap West, located at 365 S. Crown Hill, Orrville, Ohio 44667.
- ◆ After receipt of your registration form and fee payment, you will receive a confirmation letter in the mail.
- ◆ A refund will only be given if you deliver prior to the start of your first class.
- ◆ Please call Dunlap's Community Education Coordinator at 330.684.4739.



### Lamaze Childbirth and Education Sign-Up

Please indicate class date:

\_\_\_ **January 29th and February 5th**

\_\_\_ **April 9th and 16th**

\_\_\_ **May 21st and June 4th**

\_\_\_ **July 30th and August 13th**

\_\_\_ **September 24th and October 1st**

\_\_\_ **November 12th and 19th**

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

Address: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

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

Name of Support Person:  
\_\_\_\_\_

Due Date: \_\_\_\_\_

Physician/CNM: \_\_\_\_\_

#### Method of Payment:

\_\_\_ Cash    \_\_\_ Check    \_\_\_ Money Order

To insure your space in the class, please detach this section and return it with your payment to:

**Dunlap Community Hospital-Lamaze  
Attention: Dee Frank  
832 South Main Street  
Orrville, Ohio 44667-2208**