



Toronto AcuBirthing

easing transitions from pregnancy to motherhood

&

Renee Pilgrim, R.Ac. R.TCMP at Free the Flow

Claudia Citkovitz, LAc

BIRTH BASICS: Acupuncture and Acupressure for Labour & Delivery

November 7th-8th (10am-6pm)

Tuition:

Early Bird: \$325 by Aug 1

Professional: \$375 after Aug 1

Students: \$325

Registration Date: _____

CONTACT INFORMATION

Eastern Medicine Student or Practitioner Other

First & Last Name:	
Phone number	Email:
Please check one of the following with your Registration information: <input type="checkbox"/> Regulated Profession College of Registration _____ Registration # _____ <input type="checkbox"/> Unregulated Profession Profession _____ Professional Association _____ Membership # _____ <input type="checkbox"/> Student Program of Study _____ School of Enrollment _____	
Do you have any previous training in this field? <input type="checkbox"/> Yes <input type="checkbox"/> No Details:	
Do you have any health conditions/concerns that we should be made aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No Details:	
How did you hear about this workshop?	
Would you like to be placed on the TAB Email list for updates on similar trainings & events? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Payment options Payment can be made via PayPal or etransfer (info@torontoacubirthing.ca). A receipt will be issued via email once payment is received. **Refund policy: No refund for this workshop	

Emergency Contact Name	Relationship	Phone #

Waiver Form

I, the participant release the organizers of the event and their directors, sponsors, employees and agents from any liability for death, disability, injury and property damage. The participant acknowledges the risks involved with participating in this workshops, and assumes all responsibility, and waives any claims s/he may have. The participant agrees that they have informed the organizers of any relevant medical (health or mental) concerns that they may have. ***In signing this form I am acknowledging that I understand and agree to the refund and cancellation policies and waiver.**

Print name: _____ Signature: _____ Date: _____

For office use only

Paid in Full: \$ _____ PayPal etransfer

Toronto AcuBirthing
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