



Maternity Classes Registration Form

Phelps Hospital Family-Centered Teaching Programs

FIRST, call (914) 366-3382 to confirm class dates and availability and to pre-register.

THEN, please print out, complete, and return this form with a check payable to "Family-Centered Teaching Programs" to:

Phelps Hospital
Attention: Theresa Hagenah
701 North Broadway
Sleepy Hollow, NY 10591

Name(s): _____

Address: _____

Work Phone: _____

Home Phone: _____

Email: _____

Due Date: _____

Name of Class:	Date:	Amount:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

****Special Package:** The Childbirth Experience/LaMaze Method, Prenatal Breastfeeding Class and ABC's of Baby Care for just \$200.