



# Birthing Mothers Client Intake Form

www.birthingmothers.com · (207) 331-4682 · 15 Knowlton Street, Camden, ME 04843

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail address: \_\_\_\_\_

Partner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Best Guess Date: \_\_\_\_\_ Planned Birth Location: \_\_\_\_\_

Current Care Provider(s): \_\_\_\_\_ Pregnancy #: \_\_\_\_\_ Birth #: \_\_\_\_\_

Any current complications? If yes, please explain:

---

---

---

Any previous pregnancy/birth complications? If yes, please explain:

---

---

---

How do you envision your birth experience?

---

---

---

What do you hope your doula adds to your birth?

---

---

---

---

What do you hope your partner's role will be in your labor and childbirth?

---

---

---

---