

Kootenay Doula Group

Membership Registration and Referral List Agreement

I, _____ (your full name), agree to abide by the **STANDARDS OF PRACTICE** and **CODE OF ETHICS** as outlined by DONA International, when practicing as a member of the **Kootenay Doula Group**.

I will submit an annual membership fee of \$20-40 depending upon what I am called to pay.

The commitment that is asked upon each member to complete during the year.

- membership fee paid yearly
- attend AGM each year
- Join our Facebook private page and contribute within our circle
- Create a Biography to add to our group website

I will be responsible for keeping all my contact and biographical information updated on the **Kootenay Doula Group** website in coordination with the current website manager.

I **have observed** a full series of prenatal classes as a doula in _____ (place), in _____ (month and year).

OR

I **plan to observe** a full series of prenatal classes as a doula in _____ (place), in _____ (month and year).

I have received formal Doula training from _____ (college or certifying body), in _____ (place), in _____ (month and year).

I am seeking mentorship and would like to circle with other doulas who are beginning this journey.

_____ Yes _____ No

Signature of Doula: _____

Today's date: _____

Phone number: _____

E-mail Address: _____

Mailing Address: _____

Please contact our treasurer Lindsay Thompson at lkayt9@gmail.com or 250-777-2689 to arrange submitting an **original copy** of this form and payment of membership fees.