

Birth Person's Name: _____

Phone: _____ Email: _____

Address: _____

Name of partner who may contact me about your placenta: _____

Baby's Due Date: _____ Planned Birth Place: _____

Name of your Midwife or OB/GYN: _____

Will this be your first birth? No Yes Are you allergic to latex? No Yes

Do you have any food or environmental allergies? No Yes (please list):

Have you had any of the following during this pregnancy (please check all that apply even if you have been treated, make a note in the "Other" Category if you have a history of the following or any that are not listed)

None Group B Strep (GBS+) Hepatitis A/B/C MRSA HSV HPV Urinary Tract Infection (UTI)

Other STD/STI (Chlamydia, Gonorrhea, HIV, other) Other Infections/Diseases (please list):

Do you have any health complications? Are you taking any medication?

Choose the Service Location

Preparing the placenta in your own home is optional. If you choose in-home preparation, someone must be present at all times while I am working. In-home preparation requires two visits to complete. You may also choose to have your placenta encapsulated in my own kitchen. In that case, I will come pick up the placenta from your birth place on the day your baby is born and return the completed capsules to you when I am finished. I choose to have my placenta encapsulated: in my own home kitchen. (Extra \$50 for in home prep) in my placenta encapsulator's kitchen.

Choose the Encapsulation Method

Raw Foods: sliced raw and dehydrated at 160 – 145 degrees. Traditional Method: steamed, sliced and dehydrated at 145 degrees. I choose this method of preparation for my placenta: Raw Method Traditional Method (recommended)

If TM: Herbs to add During Steaming

Your capsules will contain nothing but pure placenta. You may decide to enhance your placenta preparation with the use of certain foods or herbs. An herb or food added during steaming will not be dried and powdered into the finished capsules but the placenta will be infused with it by the steaming process. By checking an item here you acknowledge that you have researched the enhancements and assume responsibility for consuming them.

I would like my placenta to be steamed with the following: Lemon Ginger Jalapeno Frankincense Myrrh- Recommended with heavy bleeding following birth None

Other Options

I choose this type of capsule: size 00 Gelatin size 00 Vegetarian size 00 Berry Gelatin

A photo of your placenta is taken for my records. Would you like a copy of it emailed to you? No Yes

A free cord keepsake is included in your package. This is optional. Would you like a cord keepsake? Shape ideas: heart, circle, spiral, infinity loop No Yes, shape: _____

Are you interested in any of the following add-ons?

Tincture (\$25 extra) Salve (\$30 extra) Placenta Print (\$0 extra) Pieces of Placenta to create smoothie (\$0 extra)

Special Instructions, Comments, Questions.



Photo Release

I take photos of your placenta for record keeping purposes. These photos are available to you at any time. With your permission I may use these photos for marketing, advertising, education, peer review or promotional purposes in print or online. Identifying information will not be shared under any circumstances. Do you give permission for photos of your placenta to be used as described here?

Yes. You may use the photos. No. Do not use the photos.

Payment, Cancellation & Refund Policy

- Payment in full is due before delivery of the capsules.
- You may cancel this contract at any time but the \$50 retainer is non-refundable and covers time spent prenatally and holding aside your space on my calendar.
- If you cancel after I have picked up your placenta (or arrived for in-home preparation) but before preparation begins, I will return your placenta to you upon request and no further payment is required.
- If you cancel after the encapsulation process has begun: the balance is due in full and no refund will be given even if you choose not to take delivery of the finished capsules.

Client Responsibilities

- Talk to your care provider during a prenatal visit about your intended birth place's policies in regards to releasing the placenta. Sign any forms required and have them placed in your file.
- If you are birthing in a hospital: remind your care providers upon arrival that you plan to take your placenta and remind them again during pushing.
- Put your placenta into a covered container, secured biohazard bag or double ziplock bag. The container must be labeled with your name before I pick it up.
- It can remain at room temperature for up to 2 hours following the birth. Refrigerate or put it on ice as soon as reasonably possible. Improperly handled placentas are susceptible to spoilage.
- Do not let the placenta out of your sight. I cannot encapsulate placentas that are *examined* in a hospital's pathology lab.
- Call or text message me at 603-731-5603 after the birth to arrange a time to pick up the placenta. Please call between 7am and 10pm.
- If you are not able to contact me within 4 days of the birth, freeze the placenta until you are ready for pickup.
- Encapsulation and delivery takes 1-2 days for a refrigerated placenta. A frozen placenta will take an additional 1-2 days so that it can be safely thawed.

Turnaround Guarantee

I do my best to have your placenta back to you as quickly as it can safely be prepared. This is usually the day after I pick it up and sometimes the day following. Clients who sign this contract before labor begins receive a turnaround time guarantee. If I deliver your capsules on the third day after pickup or later you will receive a discount of \$25. I may choose to have a backup encapsulator process your placenta if I have received more than one placenta at a time so that I can meet the turnaround deadline. Clients who contact me for encapsulation after labor begins will receive second priority to contracted clients and do not receive a turnaround guarantee, although I will still strive to return your capsules within 2 days.

Limitations and Disclaimer

- I understand and acknowledge that choosing to encapsulate my placenta is not intended to prevent or treat any physical or mental diseases, ailments or symptoms and that I am choosing to consume my placenta for my own personal beliefs, whether it be spiritual or cultural. I also acknowledge that there are no statewide regulations preventing me from obtaining and encapsulating my placenta.
- I acknowledge that Bethany Leclerc has provided me with concrete information about both the benefits and risks of placenta encapsulation, and have read all included documents. I understand that my placenta will be handled and encapsulated according to OSHA bloodborne pathogens universal precautions and Bethany Leclerc Food Safety and Handling standards, and will be cleaned, cooked, dehydrated and put into pill form in a sanitary and disinfected work space. Upon receiving my placenta capsules from Bethany Leclerc I waive any and all rights to hold either of them responsible for any undesired effect of consuming the capsules.
- If my placenta is not encapsulated in my own home, I put full trust and acknowledgement that it is being handled in a sanitary and safe environment. I have disclosed to Bethany Leclerc my STD status. I understand that upon receiving the pills, Bethany Leclerc is no longer liable, including but not limited to any other person(s) ingesting my own placenta capsules.
- I do not hold Bethany Leclerc responsible or liable for any transport mishap that is beyond her control (ex. car accident or detainment).

I agree to the preceding Client Responsibilities, Limitations and Disclaimer and Refund Policy by signing below:

Signature: _____ Date: _____

Please send one signed copy for this form to:
A Golden Birth, c/o Bethany Leclerc, 32 Oak St, Hudson, MA 01749