



Hackensack
Meridian *Health*
Hackensack University
Medical Center

30 Prospect Avenue
Hackensack, NJ 07601
Phone: 551-996-2189
Fax: 551-996-2635

Class Registration Form

Please note that all classes have a limited number of seats available. Please contact the Department of Childbirth Education to check availability and to reserve your seat by phone at 551-996-2189 or by email at ChildbirthEd@hackensackmeridian.org. A completed registration form and payment must be received at least 10 days before the start of the class to confirm your seat.

Name(s) of Attendee(s): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Alternate Phone: _____

Email: _____

Please mark the class(es) you are registering for:

Classes Offered	Fee	Class Date(s)
<input type="checkbox"/> The Happiest Baby on the Block™	\$60 per couple	_____
<input type="checkbox"/> Breastfeeding	\$50 per couple	_____
<input type="checkbox"/> Infant Care and Safety	\$50 per couple	_____
<input type="checkbox"/> Marvelous Multiples®	\$200 per couple	_____
<input type="checkbox"/> Prepared Childbirth	\$175 per couple for weeknight	_____
	\$200 per couple for weekend	_____
<input type="checkbox"/> Sibling Preparation	\$40 per child	_____
<input type="checkbox"/> Childbirth Pavilion Tour	Complimentary	_____

Total Payment Enclosed \$ _____

Check number _____
Payable to: Hackensack University Medical Center

Credit/Debit Card
Please contact office to process credit card payment.

Mail to: Hackensack University Medical Center
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