



Covid19- Labor Doula Services Agreement

We/I _____ agree to the following:

I. The Prenatal Visits

1. The Orchid Nest will provide up to two visits (live or virtual) prior to the birth at which times the parties shall discuss a proposed birth plan that reflects the needs and desires of the mother and partner.
2. We will provide a one hour visit with a licensed mental health counselor to assist in creating a postpartum plan as well as screen you for postpartum depression risk. Our goal is to prepare you for a healthy postpartum period.

II. The Birth

2. The doula works for the mother and her partner.
3. The doula will support the decisions of the mother and partner within the limits of the doula's expertise.
4. The doula will articulate and explain all available options and birth-plan choices during the birth-plan session.
5. The doula will remain with the mother (if permitted) once active labor has begun or earlier as requested by the mother.
6. The doula will not perform any medical procedures or make decisions regarding medical care for the mother and/or baby.
7. A doula will be on call 24 hours a day starting after the contract is signed.
8. The doula that is on call will attend (live or virtual) the birth. If the doula cannot attend, a backup doula will attend.
9. The doula shall strive to create a calm and peaceful environment within the circumstances allowed by location.
10. The doula will remain with the mother (if permitted) for at least one hour after the birth of the baby.

Clients Initials _____

11. The doula will provide an optional one hour follow-up postpartum visit (live or virtual) within 10 days after the birth of the baby. At this meeting, the doula will answer any and all questions regarding the birth and care of the newborn. Additional postpartum doula services can be arranged through the Orchid Nest.

III. Mother and Partner

12. The mother agrees to contact the doula at the onset of labor, even if the doula is not needed yet. The mother will advise where the doula should report to begin the labor support. The doula will report within two hours of the mother's request, usually sooner.

IV. Fees for Service

13. The fee for labor support is \$1350. The payment amount includes one/ two prenatal visits, 1 postpartum follow-up visit (limited to 1 hour), unlimited telephone support and face-to-face labor support or virtual not to exceed 24 hours per doula. The client shall pay a deposit of \$700 at the time of signing the contract and the balance must be paid in full by 35 weeks of pregnancy.

Please note that this service and payments are non-refundable.

14. Additional face-to-face labor support beyond the 24 hours per doula contracted will be billed at the rate of \$40 per hour. These fees will be billed after the birth and are due within 10 days of the delivery date.

15. If you have not selected the tub rental service but decide in labor to utilize this service, your credit card will be automatically billed for the fee of \$350.00 and you understand the terms and conditions of said tub rental service as stated in the Tub Rental Services agreement.

16. At the signing of this contract it is assumed that none of us can anticipate the type of labor and birth you are going to experience. Due to the pandemic hospital policies are being changed with little to no notice. We are committed to helping our clients navigate the system and offer the best support whether that be live or virtual.

Clients Initials _____

17. Should the mother or partner fail to notify the doula 2 hours prior to the requested report time, and the doula misses the birth, the full fee will be retained by the Orchid Nest.

18. The full fee will be refunded if the doula misses the birth as a result of reporting to the birth more than two hours after the request for support.

19. If LIVE support was unavailable due to hospital policy, your doula will provide 4 hours of LIVE postpartum support within the first two weeks of birth OR you will receive a \$400 refund.

20. Force Majure – The doula shall not be responsible for failure to fulfill obligations due to causes beyond the doula’s reasonable control, including without limitation, acts or omissions of government or military authority, acts of God, transportation delays, fires, floods, riots, wars, terrorist acts, or any other causes, directly or indirectly beyond the reasonable control of the doula, so long as the doula has used her best efforts to remedy such failure or delays.

21. Release, Indemnity and Hold Harmless – You agree to release, indemnify and hold harmless from and against any claims, demands, actions, liens, rights, surrogated or contributed interests, debts, liabilities, judgements, cost and attorney’s fees, arising out of, claimed on account of, or in any manner predicated upon the doula’s participation prior to and during the birth process, including loss or damage or personal injury or death of any person which may occur as a result of the doula’s participation prior to and during the birth process.

22. We, the undersigned, have read this Labor Doula Contract. We accept and agree to the terms and conditions.

Doula/Orchid Nest: _____ date: _____

Mother Signature: _____ date: _____

Payment Information

Today's Date _____

Name of Labor Doula: _____

Baby's estimated due date _____

Planned place of birth _____

Mother's Name _____ Date of birth _____

Address _____

City _____ State _____ Zip _____

Phone number _____ Is this a cell phone? yes ___ no ___

Email (personal) _____

Partners/spouses name _____

Phone number _____ Email (personal) _____

Referred by? _____

Labor Doula Payment Information:

Total fee: \$1350.00

Deposit amount: \$700.00

Balance due: _____ on _____ (35 weeks)

Payment Method:

Check enclosed _____

Credit Card number _____

Date of Exp _____ CW2 _____

Billing info if different from above:

Would you like us to automatically bill your credit card for the remaining balance due? Yes ___ No ___

**** Please make a checks payable to Orchid Nest**

Mail to: The Orchid Nest, 525 SE 6th Avenue, Suite B, Delray Beach, FL 33483