

## Registration Form

To register for a group breastfeeding class, please print out, complete and mail this form with your class fee.

Call (516) 365-4877 or email [info@breastfeedingresources.net](mailto:info@breastfeedingresources.net) for upcoming class dates and fee.

Please register me for the group breastfeeding class for the month of \_\_\_\_\_

Name/s \_\_\_\_\_

Address \_\_\_\_\_

Email (please print) \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Due Date \_\_\_\_\_

Referred by \_\_\_\_\_

Note: Fee must accompany registration. If attending as a couple, second registration is free. Please make check payable to Beverley Rae and mail with this form to:

Breastfeeding Resources  
64 Manhasset Woods Road,  
Manhasset, NY 11030