



BIRTHING BEYOND, LLC'S CERTIFIED LABOR SUPPORT SERVICES

RELEASE FROM LIABILITY

In entering into an agreement for certified Birth Doula (Labor Support) Services with Vanessa Flood on this date I/we hereby acknowledge that during the performance period of this agreement, services may be provided to me/us in my/our home, at hospital and/or birthing center. We understand Vanessa Flood has a limited role pursuant to the description of tasks outlined in the above-referenced agreement wherever services are provided to me/us.

Vanessa Flood has not represented to me/us that contracting for her services guaranteed in any way, a risk free or emergency free labor and birth experience. I/We understand that my/our doula does not make medical or nursing decisions on my/our behalf, including the decision when to seek medical care at a hospital or birthing center when labor support services are provided in my/our home. When services are performed in my/our home or a medical facility, I/we acknowledge that Vanessa Flood is not responsible for the performance of clinical tasks to include medical or nursing decisions regarding the inclusion or exclusion of treatments available to me/us and my/our baby. Now, therefore, in consideration of the above acknowledgements, I/we (both jointly and separately) on behalf of myself, ourselves, my/our heirs, administrators, personal representatives, executors assigns to **RELEASE AND FOREVER DISCHARGE** Vanessa Flood from all damages or causes of action, either at law or in equity, which I/we may have or acquire or which may be accrued to me/us, my/our heirs, administrators, personal representatives, executors, or assigns as a result of using the doula services of Vanessa Flood. I/We intend this to be a **COMPLETE RELEASE AND DISCHARGE** from all liability.

I/We have read all statements contained herein and I/we fully realize that I/we are signing a **COMPLETE RELEASE AND BAR** to any claim, which I/we have or believe I/we may have resulting from our agreement for birth doula services.

(Date)

(Client Signature)

(Partner's Signature)

(Parent's of Minor Client)

(Doula's Signature)