

Application Form

Please complete and return to us with your remittance (cheques payable to 'Blue Lagoon Birth Pools').

Please refer to our leaflet - we recommend hiring a pool 2 weeks before your due date.

Name: _____

Address: _____

Postcode: _____

Home Tel: _____ Mobile: _____ Work Tel: _____

Email: _____

Partners Name: _____

Person responsible for the pool on your behalf: _____

We suggest this person is present when the pool is collected or delivered to you.

Location of pool (please tick) Hospital - name: _____ Home ground floor (recommended)

Other Location? _____

(Structural advice is available if you are unsure of the weight loading - just call us to discuss).

Midwives/team name(s) (if known): _____

Have you used a pool before? _____ If so, where did you hire it from, or which maternity unit was it in?

Is this your first baby? Yes/No Due date _____ Age _____ Height _____

How did you hear of Blue Lagoon? _____

Hire start date ____ / ____ / ____ Day _____ Hire end date ____ / ____ / ____ Day _____

Up to 4 weeks @ £195.00

Additional days (after 4 wks) @ £5.50 p/day (if known)

Standard delivery @ £40.00

Standard collection @ £40.00

I will collect the equipment myself (tick)

from Lancashire (tick) Suffolk (tick)

I will return the equipment myself (tick)

Disposable liner @ £30.00 (Optional)

_____ Extra metres fill pipe @ £1p/m

Total

£50 damage retainer deposit (all hires; refundable when equipment returned in good condition - payable as separate cheque please)

A non-refundable £50 'hire deposit' to reserve your pool is acceptable up to three weeks prior to your hire. To retain your reservation, the balance must be paid in full by three weeks prior to your hire.

Checklist

£50 'hire deposit' enclosed? (tick) Total enclosed? (tick) £50 Damage retainer deposit enclosed (tick)

Signed (signature of hirer) _____

If you know someone who would like some information on Blue Lagoon Birth Pools, do tell them about our website - thank you.