

[LOGO]

[NAME – BUSINESS NAME/DESCRIPTION]

[ADDRESS]

[PHONE] [LANDLINE] [MOBILE] [EMAIL]

Web site: [WEBSITE URL]

- POSTNATAL DOULA CONTRACT -

This contract is between (mother) and [NAME] (doula).

Doula:

I will be available for hours a day days a week excluding weekends.

or

I will be available for a total of hours, on a flexible basis spread over the weeks covered by this contract.

- Mondays for hours between -
- Tuesdays for hours between -
- Wednesdays for hours between -
- Thursdays for hours between -
- Fridays forhours between -

Starting from until (approximately). Except any occasion such as attending a birth or as otherwise agreed.

I agree that my role is supportive and that I will be guided by the mother's needs, wishes and decisions. I agree to give postnatal support and will carry out all tasks helpful to the mother.

Mother:

I understand and agree that the doula works for me for the above stated hours. I agree the hourly fee to be £?? which will be paid on a weekly basis plus £0.40 per mile travel expenses. If I cancel this agreement once it has been signed, but before work was due to commence and before the baby is born, I agree to pay a cancellation fee of £??? [typically 1st week fees or 8-10 hours] (non-refundable deposit paid upon signing the contract). If I cancel this agreement once the baby has been born because I have changed my mind about the support I need, I understand and agree to pay my doula 50% of her total earnings in compensation for the work the doula could have otherwise taken on.

The decision to employ a doula remains the individual's and the doula cannot accept any responsibility for problems during or after pregnancy and birth.

Date:

Signed (mother):

Signed (doula):