



International Center for Traditional Childbearing
PO Box 11923
Portland, OR 97211
503-460-9324

FULL CIRCLE DOULA TRAINING INTENSIVE REGISTRATION FORM

Date: _____ Training Location: _____ Month/Yr: _____
Name: _____ Phone: _____ (h) _____ (w) _____ (c) _____
Home Address: _____ City, State, Zip: _____
Email: _____ DOB: _____

FAMILY STATUS (circle one) Single Married Divorced Separated Widowed **Children?** Yes No **Number:** ___ **Ages** _____

INCOME SOURCE (circle one) Employed Public Asst/Food Stamps Alimony Unemployment Other _____

ETHNICITY/RACE (circle one) Black White Latina/o Asian Native American Bi-Racial (_____) Other _____

EDUCATION (circle one) Diploma GED **College or degree(s):** _____

Have you attended an ICTC event or training before? Yes No Are you currently an ICTC Member? No Yes ID# _____

List previous doula training or other childbirth-related courses you've completed: _____

Each application must be submitted with:

- Two (2) character references (letters of recommendation)
- A 500-word essay detailing (a) why you want to become a doula and (b) how you plan to use this training

*Payment is required in full at time of registration. A confirmation letter & receipt will be e-mailed to you along with The Full Circle Doula Philosophy paper, foundational book title and reading list once your registration is completed. The paper and foundational book must be read before the first class (Orientation). The training manual and doula bag will be distributed on the first day of class, so apply early!

*The late registration fee is required to accompany all applications received after the deadline date.

REFUND POLICY: All fees are non-refundable. A 95% tuition refund is available only up to and including the registration deadline date. Check website (www.ictcmidwives.org) for deadline. After the deadline date, no refunds will be made but late registrations will be accepted with the appropriate fee. In the event ICTC cancels a training, tuition payments received (but not fees) will either be transferred to a future class upon request or refunded entirely (allow 3-4 weeks for processing). New registrations for future classes will require a new application.

Yes! Register me for the ICTC Full Circle Doula Training!

\$500 Non-Member Tuition* \$ _____

\$400 ICTC Member Tuition* \$ _____

\$25 Late Payment Fee** (non-refundable) \$ _____

Total of this application: \$ _____

I have enclosed a check or money order (Payable to ICTC).

I am paying \$ _____ by debit/credit through PayPal on ____/____/____ (date).

(To use your credit/debit card: Log into your PayPal account and Send Payment to ictc@ictcmidwives.org.)

____ (initials here) **I understand that photos taken at trainings are property of ICTC and may be used publicly.**

Fax or mail completed application packet to ICTC – Doula Training at 503.445.7760 or PO Box 11932, Portland OR 97211
For more information: Contact Aqiyah Collins at 503-460-9324 or aqiyah@ictcmidwives.org



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FULL CIRCLE DOULA REGISTRATION ESSAY

Why I, _____, want to become a doula and how I plan to use the Full Circle Doula training (300-500 words):



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FULL CIRCLE DOULA TRAINING LETTER OF RECOMMENDATION

Your Name:

Phone:

Date:

Email:

Doula Candidate:

The person who asked you to complete this recommendation is a candidate for the ICTC Full Circle Doula Training program. If accepted, she will take part in a wonderful training in traditional childbirth practices.

A Full Circle Doula is a birth companion who provides physical, emotional, and spiritual support and comfort to pregnant women throughout labor, birth, and the postpartum period. Please keep this in mind as you answer the questions and describe why you believe this person would make a good contribution to the childbirth community.

If you prefer, you may write a narrative (short essay) that conveys your sentiments. Thank you for your time.

Q1. How do you know the candidate, and for how long?

Q2. What particular traits, qualities, or skills does the candidate possess that you feel suits them for doula work?

Q3. Relay an instance when the candidate displayed the type of skills needed for this work.

Q4. Do you feel the candidate is spiritually and emotionally grounded and capable of supporting a laboring mother? Explain.

Q5. How do you envision that this candidate, in her role as a doula, might be of benefit to her community?

Q6. Do you have any hesitations about recommending this candidate to work as a doula?

Thank you for taking the time to encourage this candidate in her pursuit of a future in traditional childbirth. Please return this form to the email address below.

Aqiylah Collins
Doula Training Coordinator
ICTC Full Circle Doula/Birth Companion Training Intensive
aqiylah@ictcmidwives.org * 503.460.9234

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FULL CIRCLE DOULA REGISTRATION CHECKLIST

Please be sure that all of the appropriate paperwork is completed and submitted by the registration deadline

- Registration form
- Registration essay
- Letters of recommendation (2)
- Payment via check, money order, or Paypal

Once your paperwork has been received and processed, you will be notified of registration completion and sent a confirmation letter/receipt via the email address you provide on the registration form.

The confirmation letter will include:

- A receipt for your payment
- The training location information
- The Full Circle Doula Philosophy paper*
- The title of the foundational book*
- A local resource list (for out of town students)

*These items are form the basis of the doula training and are **required reading prior** to the training orientation.