

AMNION®
Intake Form - Print and Bring with You

Amnion: is an aquatic treatment that follows the chronological developmental movements that arise in the prenatal and neonatal stages. Plan on bringing a suit and comfortable clothes for after the session.

Name: _____ Today's Date _____

Birthdate: _____ Profession _____

Address _____ State _____ Zip _____

Telephone: _____ Email: _____

- What is your intention in exploring your prenatal experience?

- Do you have any part of your body that needs special consideration?

- Anything I need to know about your relationship to water?

- What information concerning your prenatal experience would help us to better hold a container for your session?

- Are you presently using medications or drugs? List...

- I have access to follow up therapy after this session? Yes__ No__

- If you do not have access to follow up therapy, how do you plan to get support after this session?

Signature: _____ Date: _____