



3333 Station House Road, Suite B * Chesapeake, VA 23321 P: 833-JAMII4U (526-4448) F: (757) 859-0007

Midwife Assistant Financial Agreement

I understand that by Virginia law having a midwife assistant is mandatory to have a home birth.

I understand that an experienced Jamii Birth and Wellness Services, LLC midwife assistant will be assigned to me, and I will be responsible for the complete payment of \$500.00 to secure their services. With this knowledge, I agree to pay the complete amount by 36 weeks of pregnancy. I understand that my home visit will not be scheduled until I have paid the fee.

I understand that in the case that I have signed onto Jamii Birth and Wellness Services, LLC after the 36 weeks mark that I will be responsible for the full payment of \$500.00 to secure my mandatory midwife assistant.

I agree to pay:

Midwife assistant fee of \$500.00 in full

- Money Order
- Cashier's Check
- Credit Card

Printed Name _____ Date ____ / ____ / ____

Signature _____