



# Birthing Tub Rental Agreement

Name: \_\_\_\_\_

Due Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

I will be using the tub at: Home: \_\_\_\_\_ Birthing Center: \_\_\_\_\_

Midwife or Physician's Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Pool recommended by: \_\_\_\_\_

# Terms of Agreement

Octavia Lindlahr, Birthing Tub Owner, agrees to deliver/offer a sanitized and inspected portable Birthing Tub Kit to include the items detailed on the document entitled, "Items Included in Your Package". If, for any reason, any part of the Birthing Tub Kit is not working properly, it will be replaced ASAP at no charge to the client. Therefore, it is required that the client unpack and inspect the contents of the Birthing Tub Kit upon receipt. It is then requested that the client confirm by e-mail ([sacredmoher@hotmail.com](mailto:sacredmoher@hotmail.com)) that the equipment is working and that the kit is complete. A trial-run is recommended before actual use.

The Birthing Tub Kit is to be picked up no earlier than two weeks before the expected due date of the client. The rental period is over once the baby is born. Please call Octavia Lindlahr (818) 645-4692 at that time.

The client agrees to deliver the Birthing Tub Kit back to the Birthing Tub Owner within three (3) days of the birth of the baby. In the event that another client is in need of the Birthing Tub before the 3 days have expired, the client agrees to allow the client in need to pick up the tub from their residence or place of use.

**PAYMENT:** The amount of \$250 represents total payment for the Birthing Tub rental and shall be paid upfront and in advance. Payments made by check will be cashed, and the equipment available for pick/up only afterwards. Checks should be made out to: Octavia Lindlahr and mailed to: 22636 Oxnard Street, Woodland Hills, CA 91367.

**REFUNDS/POOL NOT USED:** There will be no refunds issued for any circumstances beyond the control of the Birthing Tub Owner (i.e., complications of pregnancy, birth went too quickly, hospital or midwife did not end up using the tub, etc.).

Octavia Lindlahr, Birthing Tub Owner, is hereby released and held harmless from any and all responsibility or liability for complications, both maternal and infant, including morbidity, mortality, injury, or physical property damage in connection with the use of said portable Birthing Tub Kit before, during, or after labor and/or birth. You must notify the Birthing Tub Owner immediately of any potential problems otherwise she cannot be responsible for such problems.

Client agrees to pay the replacement cost of any part of equipment, which is directly damaged by misuse or negligent handling while in their possession. This could result from incorrectly installing the dual heating system, pump, puncturing, melting, ripping the pool's permanent liner; and dropping or cracking the drain pump or dual heating system. The replacement cost of any damaged equipment or necessary additional cleaning of the birth pool will be billed to you. You will be advised of this charge in advance and an invoice itemizing these charges will be mailed to you immediately.

**REPLACEMENT PARTS:** Damage to parts of the Birthing Tub Kit occasionally happens. Heaters can be left on when there is no water in the tub, dogs can mangle floor pads, and children can puncture liners. The Birthing Tub Owner will make every effort to repair equipment when and where possible, but you, the responsible renter, need to know how much it takes to replace any part of the kit. Please note that replacement cost also applies to any equipment that is not returned. Please read carefully and sign below.

Drain Pump: \$125.00  
Thermometer: \$19.00  
Floor Pad: \$65.00  
Frame: \$345.00  
Vinyl Liner: \$220.00  
Pool Cover: \$65.00  
Heater: \$135.00 each  
DVD: \$22.00  
Positioning Pillow: \$40.00

I/We agree to the terms stipulated in this agreement, and acknowledge that this agreement is a legal and binding document to which I/we are entering into voluntarily.

Client Name: \_\_\_\_\_

Client Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

Tub Owner: \_\_\_\_\_

Dated: \_\_\_\_\_

Payment: \$250/\$200 Cash \_\_\_\_\_  
\$250/\$200 Check # \_\_\_\_\_  
*\$200 Discounted Doula Client Price*

