

ONLINE ACCESS REQUEST FORM

I/we hereby request that Corrine Flatt, (702) 643-9433, corrine17@pinkpeas.org, submit the following Personal Information for the purpose of Online Access to educational materials, to:

| | |
|----------------------------------------------------------------------------------------------|-------------------------------------|
| The Bradley Method® https://bradleymethod.com | [Please initial] _____ and _____ |
| Spinning Babies® https://www.spinningbabies.com | _____ and _____ |
| Body Ready Method® https://bodyreadymethod.com | _____ and _____ |

PERSONAL INFORMATION:

| | | |
|-----------------|-------------------|-----------------------------|
| _____ Name 1 | _____ Phone | _____ Email |
| _____ Name 2 | _____ Phone | _____ Email |
| _____ City | _____ Zip code | _____ Estimated Due Date |

REQUESTOR SIGNATURE:

| | | |
|-------------------------|--------------------|---------------|
| _____ Printed name 1 | _____ Signature | _____ Date |
| and | | |
| _____ Printed name 2 | _____ Signature | _____ Date |