EXPECTING MUMS WORKSHOPS CONSENT FORM

Worksho	op Date/s:
Full Nan	ne:
Age:	••••••••
Email:	•••••
Contact	Number:
	I give permission to be photographed working through activities, for the purpose of social media and use on the Juizbeggy Creations website.
	I give permition for my artworks to be photographed for the purpose of social media and use on the Juizbeggy Creations website.
	I have a medical condition/allergies and I have attached/listed the details below.
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••••	••••••••

Contact Number: 0411518421 Email: arttherapy@juizbeggy.com.au

e your cu	irrent ar	enxiety lev	vels about giving birth? (5)		
On a scale of 1-5 (1 being the least anxious and 5 the most), how do you rate your current anxiety levels about adding a new little person to your family?					
2	3	4	5		
On a scale of 1-5 (1 being the least anxious and 5 the most), how do you rate your current anxiety levels about this new season in your life?					
2	3	4	5		
On a scale of 1-5 (1 being the least anxious and 5 the most), how do you rate your current anxiety levels about having the support you need?					
2	3	4	5		
Please list anything in particular you would like to gain by attending any of the Expecting Mums Art Therapy group sessions.					
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•••••	• • • • • •	• • • • • • •	••••••		
Δ.		• • • • • •	••••••		
C.		•••••	••••••		
	cale of 1-5 e your cut alle of 1-5 e your cut	2 3 cale of 1-5 (1 being e your current are family? 2 3 cale of 1-5 (1 being e your current are end of the end of the e your current are end of the end of	e your current anxiety lever family? 2 3 4 cale of 1-5 (1 being the lever your current anxiety lever 2 3 4) cale of 1-5 (1 being the lever your current anxiety lever 2 3 4) list anything in particular the Expecting Mums Art		

On a scale of 1-5 (1 being the least anxious and 5 the most), how do

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