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*Receive local Information, News, & Resources
from pregnancy through your child's third birthday,
delivered right to your inbox.*

When do I start to show ?

Is it safe to color my hair ?

When will my baby smile ?



www.DoDparenting.org

or return this form to your OB department.

You	
Name (please print clearly)	
E-mail Address	
Re-Enter Email	
Relationship to Baby	
Spouse/Family Member/Other Supporter	
Name (please print clearly)	
E-Mail Address	
Re-Enter Email	
Relationship to Baby	
Due date	Month _____ Day _____ Year _____
Deployment	Is your spouse deployed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> About to leave/return
Signature _____	<input type="checkbox"/> I have read the privacy statement

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