**Baby Massage**



[](http://www.google.co.uk/imgres?q=baby+massage+IAIM&hl=en&gbv=2&biw=1280&bih=717&tbm=isch&tbnid=ZHInuKwva9WFMM:&imgrefurl=http://www.babistic.co.uk/about-iaim/&docid=iNC4BzXjBvYCwM&imgurl=http://www.babistic.co.uk/media/270/iaim-logo.gif&w=120&h=122&ei=wpLSTubVOs2DhQeaqejsCA&zoom=1)

Do you have a baby under 7 months old ?(or not crawling yet)

Would you like to learn how to massage your baby?

Toyhouse has IAIM qualified Instructors and runs courses for parents at:

The Toyhouse Centre, 92 St. Paul’s Way. E3 4AL

**The next course will start with session 1 on Tuesday 23rd September 1.00 – 2.00pm**

**following sessions with be Tues 30th Sept, 7th & 14th October 2025**

**& will be led by Afia**

**(Unfortunately, older children cannot attend the classes)**

* **4 x one hour classes run over 4 consecutive weeks**
* **A full body routine & a short routine to help with colic**
* **Handouts and time to share experiences**
* Group will be small, ideally, we expect you to attend for the full 4 sessions to enable you to cover the full body routine, but we understand this may not be possible. Please speak with us if any of the dates are not possible
* If you would like to attend please complete the application form below and we will get back to you.
* Or for more information please contact:

**Julie or Pip on: 020 7987 7399 or email:** [**info@toyhouse.org.uk**](mailto:info@toyhouse.org.uk)

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**Baby Massage application form (SEPT 25)**

Adult details (Please print clearly)

|  |  |  |  |
| --- | --- | --- | --- |
| Parent /  Carer Name/s | Ethnicity | Do you give consent to photos being taken YES or NO | |
| Relationship to child(ren) | Language(s) Spoken | | Interpretation Needed |
| Address | | | Postcode |
| Telephone | Email (please print) | | |
| Where did you hear about the course? | Does your child have any additional needs? | | |

Child details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First Name | Last Name | D.O.B | Gender  M/F | Ethnicity |
|  |  | / / |  |  |
|  |  | / / |  |  |

Date \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_