



COACHING AGREEMENT

Today's Date: _____

By entering into this agreement, the client acknowledges, understands and accepts the Guidelines attached. The client also agrees to hold the coach harmless from all liability.

Client Name: _____ Phone: _____

Client Address: _____

E-mail Address: _____

1. As a client, I understand and agree that I am fully responsible for my well-being during my coaching calls, including my choices and decisions. I am aware that I can choose to discontinue coaching at any time, with a 14-day notice. I recognize that coaching is not psychotherapy and that professional referrals will be given if needed.
2. I understand that "life coaching" is a relationship I have with my coach that is designed to facilitate the creation and development of personal, professional or business goals and to develop and carry out a plan for achieving those goals.
3. I understand that life coaching is a comprehensive process that may involve all areas of my life, including work, finances, spirituality, health, relationships, education and recreation. I acknowledge that deciding how to handle these issues and implement my choices is exclusively my responsibility.
4. I understand that life coaching is not a substitute for counseling, psychotherapy, psychoanalysis, mental health care or substance abuse treatment; and I will not use it in place of any form of therapy.
5. I promise that if I am currently in therapy or otherwise under the care of a mental health professional, then I have consulted with this person regarding the advisability of working with a life coach and this person is aware of my decision to proceed with the life coaching relationship.
6. I understand that information will be held as confidential unless I state otherwise in writing, except as required by law.
7. I give my permission to allow my coach to submit a confidential record of my name, phone number or email address in order to meet the requirements for coach credentialing by the International Coach Federation (www.coachfederation.org). This information will be utilized strictly for the purpose of meeting these requirements and, following the credentialing process where two assessors will validate the coach's list and subsequently destroy the two copies, only the master list will be maintained within secure files of the ICF. I agree to allow my coach to document the coaching hours with me for submission to the ICF for certification as a coach. I understand that no other personal details will be associated with this information.

I have read and agree to the above.

Signature: _____ Date: _____

Name (Printed): _____