



METIER COACHING

P. O. Box 4085
Naperville, Illinois 60567-4085
630-983-0678

Life Coaching Agreement

To my client: Please review, adjust, sign where indicated, and return to me at the above address.

NAME _____

INITIAL TERM _____ MONTHS, FROM _____ THROUGH _____

FEE \$ _____ PER MONTH, \$ _____ FOR THE PROJECT

SESSION DAY _____ SESSION TIME _____

NUMBER OF SESSIONS PER MONTH _____

DURATION _____ (LENGTH OF SCHEDULED SESSION)

REFERRED BY _____

PROTOCOL:

1. CLIENT CALLS THE COACH AT THE SCHEDULED TIME
2. CLIENT PAYS COACHING FEES IN ADVANCE
3. CLIENT PAYS FOR LONG DISTANCE CHARGES, IF ANY

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. 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/development of personal, professional or business goals and to develop and carry out a strategy/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, 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 does not treat mental disorders as defined by the American Psychiatric Association. 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, that I have consulted with this person regarding the advisability of working with a life coach and that this person is aware of my decision to proceed with the life coach relationship.
6. I understand that information will be held as confidential unless I state otherwise, in writing, except as required by law.
7. I request your permission to keep a confidential record of your 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 my 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.
8. I understand that life coaching is not to be used in lieu of professional advice. I will seek professional guidance for legal, medical, financial, business, spiritual, or other matters. I understand that all decisions in these areas are exclusively mine and I acknowledge that my decisions and my actions regarding them are my responsibility.

I have read and agree to the above. _____ Date _____