



Dr. Elizabeth Small
Coaching Client Service Agreement

Client Name: _____ E-mail: _____

Address: _____ Phone: _____

_____ Date: _____

Is it OK to leave a message on home phone? Y N On Cell? Y N

Is it OK to send text messages to cell regarding appointments? Y N

Birth Date: _____ Age: _____

Where did you hear about my services? _____

Have you experience coaching before? _____

If yes, how recently? _____

What was your experience? _____



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MAIN REASON FOR SEEKING COACHING:

Please describe any other things that may be presenting challenges to you:

What behaviors/attitudes you would like to change and describe what that change that would create for you:



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This agreement sets forth the expectations and standards that both client and coach expect during the coaching relationship. Policies and expectations are outlined in the following:

1. The relationship between Client and Coach

As the Client's Life Coach, Dr. Elizabeth Small (hereby referred to as Coach) will partner with the Client on a journey of discovery, self-exploration, accountability and follow-through. The Coach's job is to help discover, create a plan and reach certain goals in the Client's life. The Coach will help the client discover within themselves the beliefs or issues that are blocking the client from moving forward in achieving these goals.

The Coach operates from a particular coaching model, but it is the responsibility of the Client to follow through with implementing the plan set forth between Coach and Client.

2. Terms of Service

Achieving the results desired and expected by the Client and Coach normally takes time.

In order for the coaching to be most effective and to allow for time to changes and results to occur in the client's life, the client should consider committing to a period of 3 months/12 hours.

Either party may terminate the coaching relationship at any time after agreeing to have a final session before concluding the relationship and settling financially any outstanding fees.

Any fees unused after 6 months of inactivity will be considered forfeited.

Fees: The charges for coaching services are \$50 per hour. Fees are due at the time of each session in the form of cash, check or credit card, or may be paid in advance for packages. Coaching packages are available at a lower rate. A sliding scale is also available.

3. Scheduled Sessions

Regular coaching sessions will be delivered by meeting at a specific time and place agreed upon by the Coach and Client. Coaching sessions will last for 60 minutes and are billed at a rate of \$50 per hour.

Fees are payable by the month, in advance. Other terms may be negotiated, as needed.

4. Cancellation of Appointments

The Client is responsible for any regular session fees that the Client cancels with less than 24 hours' notice. Cancellation should be given by phone or text, not email, whenever possible.

5. Additional Calls

Unscheduled calls or sessions will be billed at the regular rate after a grace period of 15 minutes.



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6. Confidentiality

The Client's identity, relationship, and content of the sessions are strictly confidential except in situations where such confidentiality would violate the law or cause harm.

NOTE: As an Certified Life Coach, Dr. Elizabeth Small (Coach) logs and reports client coaching hours for the purpose of certifications.

CLIENT: I understand that the Coach will log our hours of work together as part of his professional development and certification requirements. **I consent to Coach submitting my name and contact information (email/phone) to the International Coach Federation (ICF) for this purpose.**

I understand that if the ICF should contact me to confirm my coaching relationship with Coach, they will not inquire about the topics and details of our work together, they will only confirm that I worked with Coach for the hours and time period recorded.

Signature: _____

7. Payment Method

Dr. Elizabeth Small accepts credit cards, cash, cash app and PayPal as methods of payment.

8. Liability

Client agrees and understands that Dr. Elizabeth Small is not a medical or physiological professionals. If a situation arises where medical or psychological intervention is needed, Dr. Elizabeth Small is ethically and legally bound to refer the Client to a mental health or medical professional.

Dr. Elizabeth Small, 14420 Frontier Trails Ct, Waldorf, MD, 20601
www.drelizabethsmall.com 301.659.9932

I have read this agreement and agree to abide by its terms and conditions. I acknowledge receipt of my own copy of this agreement.

Client's Signature: _____

Printed Name: _____

Coach's Signature: _____

Date: _____