



Coaching Consent Form

**ShabdSangeet Khalsa FMCHC,
Essence Of Healing, LLC
Coaching Information and Agreement Form**

I, _____ agree to participate in Essence of Healing, LLC wellness program, and acknowledge that my Coach will be

I understand that I can contact my Coach, if needed by calling 207.322.8693 or emailing to coaching@essenceofhealing.coach.

I understand that this agreement to participate in Essence Of Healing, LLC Coaching means:

I consent to being contacted by my Coach either in person, or by phone for an initial intake for an initial intake session for about 60-90 minutes, and then for 30 or 60 minute coaching sessions, as frequently as we (the coach and I) deem necessary. _____

I understand that participation in the Essence Of Healing, LLC Wellness and Coaching Program is voluntary and I may withdraw from the program at any time by notifying my Coach. _____

I acknowledge that Essence Of Healing, LLC is not counseling or psychotherapy. Coaching is its own unique process that draws on strategies for goal attainment. My Coach will serve as a guide in this unique process. If my Coach believes at any point that therapy services are necessary, we can discuss options for an appropriate referral with a therapist. _____

I understand that my role is to make all appointments or calls on time, and I will cancel or reschedule at least 24 hours ahead to reschedule if an unavoidable conflict arises for me.

I understand that in seeking the services of a Coach, I acknowledge, that like most people, I may need a new perspective to reach goals that I have not been able to reach on my own. In those instances it may seem my Coach is asking probing questions or nudging me beyond an old "comfort zone," and I may experience temporary emotional discomfort in those moments. I agree that it is my responsibility to tell my Coach what works and what doesn't work, and to be honest about how I would like to be coached. _____

I affirm that I am fully responsible for the choices and decisions in my life. _____

I affirm that I am at least 18 years of age or older. _____

I have read the above (or the above has been explained to me) and I hereby agree to participate in the Essence Of Healing, LLC Wellness Program and follow the guidelines. The rest of this document is designed to inform me about the services so that I understand the professional wellness coaching relationship. I will determine with my Coach the number of coaching sessions, and will evaluate progress and whether to continue at the last of the scheduled sessions. This agreement may be extended or terminated by mutual agreement. The coaching services provided to me will include a supportive, comprehensive process for addressing health and well-being goals. Topics that I may choose to talk about may include nutrition/diet, exercise, stress, time management, health challenges, recreation, work goals or life balance.

CONFIDENTIALITY: As a matter of ethics, my Coach, by the signature below, affirms that she will maintain strict confidentiality about all personal information shared by me. The only exception is if the Coach has reasonable cause to believe that there are threats to seriously harm myself or others. Then the Coach is obligated to report the situation to the proper agent. Our signatures on this agreement demonstrates the intent to fulfill the intentions and requests above, and reflect a complete understanding of the services to be provided. As a client, I understand and agree that I am fully responsible for my well-being during my coaching sessions, including my choices and decisions.

Signature _____ Date _____

(Client)

Signature _____ Date _____

(Coach)

Signature _____ Date _____

(Witness in case of English language translation)