



Coaching Agreement

Procedure: Please plan on two sessions a month for 50-60 minutes each. The first session may run a little longer since we will be exploring lots of information at first. If you need to reschedule any session, please let me know 24 hours in advance by phone (not text). I ask for a commitment of 6 sessions. After that time, we will re-evaluate your progress and our work together and make any further agreements.

Preparation: After our initial session, I ask that you come to the coaching sessions prepared with an agenda of what you want from each meeting. Please take time to fill-out the Coaching Call Prep Form (the last form in this packet). If possible, it would be helpful for you to email me this form twenty-four hours in advance of our phone session, excluding the first session.

Expectations: Please be honest with yourself and me throughout the coaching process. You can expect me to be straightforward, constructive and confidential. You can say anything to me, positive or negative; this includes honesty in your responses to me, and letting me know if something makes you uncomfortable or if you don't want to respond to a question. The key to an effective coaching relationship is communication. Please let me know at any time if you have concerns that we haven't addressed.

As your coach, I am a resource for you to use to your best advantage. I will share concepts or insights, and ask re-orienting questions that are intended to increase your success in attaining your health goals.

I expect your best. If you aren't doing your best, I'll ask you to. I expect you to be willing to grow. From time-to-time, I'll make a direct request, like: "Will you accomplish 'X' by the end of the month?" You always have the option of accepting a request, declining or counter-offering something that might be more workable for you.

Retainer and payment procedure: Full payment for single, six, or nine session package is due on our first session. Please make payable to Oakley Integrative Health, LLC. This retainer includes six, 45-50 minute in-person sessions or telephone conversations, plus email support Monday-Friday. If you are paying by electronic check please send to Edie Oakley (4 Pine Top Place Durham, NC 27705).

Termination: Because of the time, scope and nature of the work, the initial contract is for three (3) months of coaching. Thereafter, the work is done on a month-to-month basis. If possible, I ask that you let me know one month in advance when you are thinking of stopping our work. Payment made for the current (ending) month will be considered payment in full unless there is an unpaid balance. In the event of fees owed at the time of cancellation, full payment is due.

Confidentiality: I recognize that in the course of our work, you may give me the following: future plans, health information, financial information, job information, goals, personal information, and other proprietary information. I will not at any time, either directly or indirectly, use any information for my own personal benefit, disclose, or communicate in any manner any information to any third party. I will not divulge that you and I are in a coaching relationship without your permission. I will hold everything that we say and do confidential unless you present as a physical danger to yourself or others. In this case, I will inform legal authorities so that protective measures can be taken. In addition, you should know that unlike a physician or a lawyer our confidentiality agreement is not protected by law. Should it ever happen, I cannot claim in court to be unable to divulge the contents of our conversations.

Nature of the relationship: You are aware that the coaching relationship is in no way to be construed as psychological counseling or psychotherapy. In the event that you feel the need for professional counseling or therapy, it is your responsibility to seek a licensed professional. Coaching results are not guaranteed. You enter into coaching with the understanding that you are responsible for creating your own results.

Client Waiver: Simply stated that you understand that I am a certified Integrative Health Coach offering motivational and educational services. I cannot be held liable for any advice, suggestions or guidance that I provide during our work together.

Client has read and agrees to the parameters of the coaching practice which have been outlined on the previous pages:

Client signature: _____

Date: _____

Coach signature: _____

Date: _____