

Client Coaching Agreement

Name _____

DOB _____

Phone _____

Email _____

Occupation _____

How did you learn about Mia's Life Coaching?

Newsletter _____

Friend Name _____

Advertisement _____

Other _____

Session Fees: \$90 per 60-minute Session \$45 per 30-minute Session

1. As a client, I understand and agree that I am fully responsible for my physical, mental, and emotional being during my coaching sessions, including my choices and decisions. I am aware that I can choose to discontinue coaching at any time.
2. I understand that coaching is a Professional-Client relationship.
3. I understand that my coach is designed to facilitate the creation and development of personal, professional, or business goals and to develop and carry out a strategic or plan for achieving those goals.
4. I understand that coaching is a comprehensive process that may involve all areas of my life, including work, finances, health, relationships, education, and recreation.
5. I acknowledge that deciding how to handle these issues, incorporate coaching into those areas, and implement my choices is exclusively my responsibility.
6. I understand that coaching does not involve the diagnosis or treatment of mental disorders as defined by the American Psychiatric Association.
7. I understand that my coach is not a therapist.
8. I understand that coaching is not a substitute for counseling, psychotherapy, psychoanalysis, mental health care, or substance abuse treatment. I will not use my coaching session to replace any diagnosis, treatment, or therapy. If I am currently receiving psychiatric care, I will consult with my provider or therapist to ensure working with my coach is in my best interest at this time.
9. I understand that information will be held as confidential unless I state otherwise, in writing, except as required by law.

10. I understand that if I reveal information that involves physically hurting myself or other, the coach must report such information and refer to mental health professionals accordingly.
11. I understand that certain topics may be anonymously or hypothetically shared with other coaching professionals and Mia Allen (also known as Mia's Assisting LLC or Mia the Assistant) will take great care of my private information and privacy.
12. I understand that my information may or may not be used for training or consultation purposes and Mia Allen (also known as Mia's Assisting LLC or Mia the Assistant) will change any identifiable information to protect my privacy and maintain confidentiality.
13. I understand that coaching is not to be used as a substitute for professional advice by legal, medical, financial, business, or another qualified professional. I will seek independent professional guidance for legal, medical, financial, business, or other matters.
14. I understand that all decisions in these areas are mine and I will do what makes me happy and comfortable.
15. I acknowledge that my decisions and my actions are my responsibility.

**Because professional coaching is not considered medical treatment. Health insurance does not apply.
Clients are responsible for fees and services.**

I have read and agree to the above.

Client Signature

Date:

Email Application to business email.

Business Email: miasassistingllc@gmail.com

Backup Email: miatheassistant@outlook.com