



Coaching Agreement

Client Name: _____
Email: _____
Phone Number: _____
Start Date: _____

Services Provided

WellPath Coaching LLC agrees to provide health coaching services to the Client, which may include:

- One-on-one, group, family or any combination of coaching sessions
- Personalized health and wellness plans
- Support and guidance on nutrition, fitness, and lifestyle changes
- Email and text support between sessions

Responsibilities

Coach Responsibilities:

- Provide a safe and supportive environment for coaching
- Offer guidance, support, and accountability
- Maintain confidentiality of all Client information

Client Responsibilities:

- Be open and honest during coaching sessions
- Complete any assigned tasks or activities
- Communicate any concerns or issues with the Coach promptly
- Attend scheduled sessions or provide at least 24 hours' notice for cancellations

Payment Terms

- The Client agrees to pay WellPath Coaching LLC the agreed-upon fee of \$_____ per session/package.
- Payment is due before the start of the first session/package.
- Payments can be made via [payment methods accepted].

Cancellation and Refund Policy



- **Cancellations:** Sessions cancelled with less than 24 hours' notice will be charged in full.
- **Refunds:**
 - If the Client is not satisfied with the coaching services after the first session, they may request a refund for the remaining sessions in the package.
 - Refunds will be processed within 10 business days of the request.
 - After the first session, no refunds will be issued for any remaining sessions unless there are extenuating circumstances, which will be evaluated on a case-by-case basis.

Confidentiality

All information shared by the Client during coaching sessions will be kept confidential and will not be disclosed to any third party without the Client's prior written consent, except as required by law.

Limitation of Liability

The Client understands that the Coach is not a licensed medical professional and that health coaching is not a substitute for professional medical advice, diagnosis, or treatment. The Client agrees to consult with their healthcare provider before making any changes to their diet, exercise, or health regimen. WellPath Coaching LLC shall not be liable for any injuries or damages resulting from the Client's participation in coaching sessions.

Termination

Either party may terminate this agreement at any time with written notice. In the event of termination by the Client, the refund policy as stated above will apply.

Acceptance

By signing below, the Client acknowledges that they have read, understood, and agree to the terms of this Health Coaching Agreement.

Client Signature: _____

Date: _____

Coach Signature: _____

Date: _____