



Coaching Agreement

Participant agrees to the following terms:

1. As a client, I understand and agree that I am fully responsible for my physical, mental and emotional wellbeing during my coaching calls, 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 I have with my coach that is designed to facilitate the creation/development of personal goals to develop and carry out a strategy/plan for achieving those goals.
3. **I understand that I will call my coach at the scheduled time** unless there is an emergency. IM Health has a **48-hour cancellation policy** to reschedule your appointment, or it will be considered a missed appointment. I will pay for long distance charges, if any.
4. **I understand that I may miss up to 2 coaching sessions during the 16-week program. If I miss more than 2 sessions, I understand that I may be disqualified to continue to participate in the program.**
5. I understand that coaching is a comprehensive process that may involve all areas of my life, including work, finances, health, relationships, education and recreation. I acknowledge that deciding how to handle these issues, incorporate coaching into those areas, and implement my choices is exclusively my responsibility.
6. **I promise that if I am taking any medications, I have informed my doctor(s) or other appropriate healthcare providers, that I will be participating in the IM Health lifestyle change program to help improve my health and they will collaborate with me to adjust my medications if necessary before the program begins.**
7. I agree to authorize my healthcare providers to release my blood work test results to IM Health LLC, in order to track the results before and after the program. I understand that information will be held as confidential unless I state otherwise, in writing, except as required by law.
8. I understand that coaching does not involve the diagnosis or treatment of mental disorders as defined by the American Psychiatric Association. I understand that coaching is not a substitute for counseling, psychotherapy, psychoanalysis, mental health care or substance abuse treatment and I will not use it in place of any form of diagnosis, treatment or therapy.
9. I promise that if I am currently in therapy or otherwise under the care of a mental health professional, that I have consulted with the mental health care provider regarding the advisability of working with a coach and that this person is aware of my decision to proceed with the coaching relationship.
10. I understand that certain topics may be anonymously and hypothetically shared with other coaching professionals for training OR consultation purposes.



11. **I understand that coaching is not to be used as a substitute for professional advice by medical or other qualified professionals.** I will seek independent professional guidance for legal, medical, financial, mental, business, spiritual or other matters. I understand that all decisions in these areas are exclusively mine, and I acknowledge that my decisions and my actions regarding them are my sole responsibility.