



Life Coaching Services Contract

Welcome to my life-coaching practice. This document contains important information about my coaching services and business policies. Please read it carefully and jot down any questions that you might have so that we can discuss them as part of the intake process. Once you sign this, it will constitute a binding agreement between us.

Life Coaching Services

The benefits of life-coaching for your child can be many. A chance to explore life while also dealing with past, current, or future difficulties can be beneficial. Life-coaching is not psychotherapy and should not replace it. While coaching, many things may come up, both positive and negative. As the coaching process unfolds, time and self exploration are needed to work out long-standing issues. Short term goals will be set every week and accountability will be introduced with the necessary follow-up. It is an active process whereby the whole family will be involved. This team effort will produce the best results.

Fees: (Fees are increased June 1st of each year)

The basic package (\$640.00 monthly) includes:

- One, weekly, in person visit or group activity (1-1.5 hours together)
- Weekly short term goal setting and appropriate accountability between in-person sessions. (This usually occurs through daily text messaging and periodic, short check-in phone calls)
The goal is to be supportive, not overbearing.
- Monthly report to caretakers

Intake fee: \$160.00

Additional parent coaching phone call: 45 minute call \$160.

Additional time with child will be billed at \$160 per 45 minutes.

Additional time may be requested at any time (e.g. college campus tours, bigger activities or just additional time mentoring during the week) and can be arranged at the above rates.

All additional charges will be discussed prior to being billed at the end of the month, including fees incurred during activities (e.g. movie tickets, food, etc.).

For group activities transportation will be the responsibility of the caretaker unless previously arranged. Transportation and travel beyond what is described will be prorated accordingly.

Insurance does not cover my activities.

Safety

By signing this document you acknowledge the various risks involved in outdoor activities. All activities and plans will be cleared with the caretaker prior to doing them. This contract acts as a waiver between myself and caretakers that I, Josh Brazier, will not be liable for any injury or harm of any kind brought about by any activity we participate in together.

Contacting Me

I am typically not immediately available by telephone. I am often available to receive and make phone calls between 7:00pm and 9:00pm. I check my voicemail regularly and will make every effort to return your call on the same day you make it with the exception of weekends and holidays. If you communicate with me via email, please understand it can be intercepted, altered, forwarded or used without authorization or detection. If you cannot reach me, and you feel that you cannot wait for me to return your call, you should call your family physician or 911. If you are feeling suicidal or a family member is threatening violence or suicide, you need to call 911. The police are well trained to handle situations ranging from suicidal individuals to out-of-control teens. Additional numbers that may be helpful include: California Youth Crises Line (800) 843-5200, Child Abuse Hotline (800) 540-4000, Domestic Violence Hotline (323) 681-2626, Elder Abuse Hotline (800) 992-1660 and Suicide Prevention Center (310) 391-1253. If I am unavailable for an extended time, I will provide you with the name of a trusted colleague whom you can contact if necessary.

Confidentiality

Within certain limits, information revealed by you during coaching will be kept confidential and will not be revealed to any person or agency without your written permission. Because I work within a group practice, consultation may occur with professionals within this practice. In addition, billing information may be accessed by administrative assistants and/or accountants. As a life coach who works with youth, I am a mandated reporter of child abuse. If I suspect child abuse based on any information I obtain during my work, I am mandated to report this to DCFS. I will typically talk with parents prior to making a report.

Your signature acknowledges that you have read and understand the above explanations regarding informed consent, confidentiality, and patient responsibilities. You agree to enter a life-coaching relationship under the terms outlined above.

Client's Name: _____ Date: _____

Signature: _____
(parent's if patient is a minor)