

Coaching Agreement

Client's First & LastName:

City, State/Province

Phone:

Zip or Postal Code

Email:

Coaching Package:

You've selected the package with ____ hours of coaching, that can be segmented into **1 hour 30 min sessions**.

Day & Time of Sessions:

Dates and time to be determined during first session

Start Date:

_____ 202__

Fee:

The cost of your ____ hour package is at a cost of ____\$. Sessions are typically scheduled on a bi-weekly cadence.

Choose your preferred communication for our coaching sessions:

- ☐ Will take place virtually via Zoom.
- ☐ By phone, please call me at _____
- ☐ In person at _____ location (to be discussed during the first session)

Note:

- I will send you a link to my Calendly page to select your availability. You may also e-mail **up to 2 times** in between sessions and **I will respond within 24-32 hours** (excluding weekends and holidays).

Cancellation/rescheduling must be made at least 48 hours in advance.

All make-up sessions/calls must be completed within the current month.

There may be a time when I also need to reschedule.

I commit to letting you know at least 48 hours in advance except in cases of emergency.

Challenges:

If I, as your coach, say or do something that upsets you or doesn't feel right, please let me know. I value truth and I genuinely invite you to discuss the situation with me right away.

Confidentiality: The information you share is **strictly confidential**. I will not divulge the content of our sessions, nor will I disclose that you are in a coaching relationship with me without your permission. However, as part of ongoing professional development, the hours for these sessions will count towards my professional development and further professional coaching certification and accreditation.

By signing this agreement, you approve that some of our sessions will be audio recorded in order for my mentor coach to evaluate my coaching competencies. I will not provide your name and your contact details to the faculty members in the Professional goal-centric certified coach program at Concordia University or to the International Coaching Federation (ICF).

Instead, I will use a pseudonym to refer to you as client. In the event that either of these entities conduct an audit to verify my coaching experience, I will contact you and ask you to get in touch with them. I can assure you that these organizations have the highest regard toward confidentiality.

Nature of Relationship:

I trust that you are aware that a coaching relationship is not psychological counseling or psychotherapy. You are entering into this coaching relationship with the understanding that I am not yet certified by the International Coaching Federation and that this “Pro Bono” coaching is part of the development and training portion of my credentialing process.

I will work collaboratively with you and support you in identifying and achieving personal and business goals; however, you are responsible for yourself in this coaching relationship as well as responsible for creating your own results.

If you agree to the above, please print a copy, sign it and bring it with you to our first session.

You may also email me the document with your signature and ‘I approve’ as the subject of your email.

Client Signature: _____ **Date:** _____

Coach Signature: _____ **Date:** _____

I look forward to supporting you in achieving your goals.