

First Name		Surname	
Pronouns		Name you would like to be addressed as/ spiritual name	
Address		Telephone Number	
Emergency contact name and number		Date of birth or birthday	
My intention for the sessions over the next 9 months is:			
<p>As a client I understand and agree that I am fully responsible for my own physical, mental and emotional well-being during my coaching sessions including my choices and decisions</p> <p>I understand that coaching is a professional client relationship that is designed to facilitate the creation and development of personal professional and business goals and creating the life I would love to live.</p> <p>I understand that coaching is a comprehensive process that may involve all areas of my life including work, finances, health, relationships education and recreation</p> <p>I acknowledge that deciding how to handle issues in those areas and implement my choices is exclusively my responsibility</p> <p>I understand that coaching does not involve the diagnosis or treatment of mental disorders as and is not a substitute for counselling psychotherapy psychoanalysis mental health care or substance abuse</p>			
Signed			
Date			