



Alison Lively, NBC-HWC
alison@creativelivingwellness.com

Date: _____

Name: _____ Age: _____ DOB: ____/____/____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Marital Status: _____ Children (circle one): Yes No Age(s): _____

Tell us your top three health goals:

1. _____
2. _____
3. _____

General Health Information

Blood type: _____ Height: _____ Weight: _____ Weight one year ago: _____ Desired weight: _____

Do you have a history of an eating disorder? (circle one): Yes No

If yes, please explain: _____

Medical History (i.e. surgeries with dates, childhood and adult diseases): _____

Allergies (food and environmental): _____

Please list your current and ongoing symptoms/health issues in order of priority (i.e., mild skin rash, moderate knee pain, severe anxiety):

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Medications and Supplements

Current medications (include name or brand, dosage, frequency)	Current Supplements (vitamins, minerals, herbals)
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Food and Diet

Describe typical meal choices:

Breakfast	Mid-morning snack	Lunch	Afternoon snack
Evening meal	Evening snack	Beverages (water, coffee, soda, alcohol, etc)	

Percentage of food cooked at home: 90-100% 75% 50% Less than 50%

Food cravings: _____

Lifestyle

Stress Level (circle one): 1 2 3 4 5 6 7 8 9 10 (highest)

Explain rating: _____

Average hours of sleep per night: _____ What do you do to relax? _____

Exercise

Type of Exercise	Duration	Times per week



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Health Coaching Agreement

This Agreement states that Alison Lively, Board Certified Health Coach, agrees to provide Coaching Services that focus on the following topics/results/outcomes/goals.

Description of Coaching: Coaching is an alliance between the Coach and the Client in a thought-provoking and creative process that inspires the client to maximize personal potential. It is designed to facilitate the creation/development of personal health goals and to develop and carry out a strategy/plan for achieving those goals.

1) Coach-Client Relationship

- A. Coach agrees to maintain the ethics and standards of behavior established by the International Coach Federation ("ICF") (coachfederation.org/ethics). It is recommended that the Client review the ICF Code of Ethics and the applicable standards of behavior.
- B. Client is solely responsible for creating and implementing his/her own physical, mental and emotional well-being, decisions, choices, actions and results arising out of or resulting from the coaching relationship and coaching calls and interactions with the Coach. As such, the Client agrees that the Coach is not and will not be liable or responsible for any actions or inaction, or for any direct or indirect result of any services provided by the Coach. Client understands coaching is not therapy and does not substitute for therapy if needed, and does not prevent, cure, or treat any mental disorder or medical disease.
- C. Client acknowledges that coaching is a comprehensive process that may involve different areas of his or her life, including work, finances, health, relationships, education and recreation. The Client agrees that deciding how to handle these issues, incorporating coaching principles into those areas and implementing choices is the Client's responsibility exclusively.
- D. Client acknowledges that coaching does not involve the diagnosis or treatment of

mental disorders as defined by the American Psychiatric Association and that coaching should not be used as a substitute for counseling, psychotherapy, psychoanalysis, mental health care, substance abuse treatment, or other professional advice by medical or other qualified professionals and that it is the Client's exclusive responsibility to seek such independent professional guidance as needed.

2) Services

The parties agree to engage in a Coaching Program through internet and/or telephone meetings. Coach will be available to Client by email and voicemail in between scheduled meetings only to clarify details pertaining to the program. Coach may also be available for additional time, at Client's request on a prorated basis rate of \$80 per hour (for example, reviewing documents, reading or writing reports, engaging in other Client related services outside of coaching hours).

The time of the coaching meetings and/or location will be determined by Coach and Client based on a mutually agreed basis. The Coach will initiate all scheduled meetings. The client will notify the coach how the client can be reached prior to scheduled appointment time.

3) Confidentiality

This coaching relationship, as well as all information (documented or verbal) that the Client shares with the Coach as part of this relationship, is bound by the principles of confidentiality set forth in the NBHWC Code of Ethics. However, please be aware that the Coach-Client relationship is not considered a confidential relationship (like the medical and legal professions) and thus communications are not subject to the protection of any legally recognized privilege. The Coach agrees not to disclose any confidential information pertaining to the Client without the Client's written consent. The Coach will not disclose the Client's name as a reference without the Client's consent.

Confidential Information does not include information that: (a) was in the Coach's possession prior to its being furnished by the Client; (b) is generally known to the public or in the Client's industry (c) is obtained by the Coach from a third party, without breach of any obligation to the Client; (d) is independently developed by the Coach without use of or reference to the client's confidential information; or (e) the Coach is required by statute, lawfully issued subpoena, or by court order to disclose; (f) is disclosed to the Coach and as a result of such disclosure the Coach reasonably believes there to be an imminent or likely risk of danger or harm to the Client or others; or (g) involves illegal activity. The Client also acknowledges his or her continuing obligation to raise any confidentiality questions or concerns with the Coach in a timely manner.

4) Cancellation Policy

We understand that situations arise in which you must cancel your appointment. Client agrees that it is the Client's responsibility to notify the Coach at least 24 hours in advance of the cancellation of a scheduled call/meeting. Coach reserves the right to charge a cancellation fee of \$50. Coach will attempt in good faith to reschedule the missed meeting.

5) Limited Liability

Except as expressly provided in this Agreement, the Coach makes no guarantees, representations or warranties of any kind or nature, express or implied with respect to the coaching services negotiated, agreed upon and rendered. In no event shall the Coach be liable to the Client for any indirect, consequential, punitive or special damages. Notwithstanding any damages that the Client may incur, the Coach's entire liability under this Agreement, and the Client's exclusive remedy, shall be limited to the amount actually paid by the Client to the Coach under this Agreement for all coaching services rendered through and including the termination date.

6) Entire Agreement

This document reflects the entire agreement between the Coach and the Client and reflects a complete understanding of the parties with respect to the subject matter. This Agreement supersedes all prior written and oral representations. The Agreement may not be amended, altered, or supplemented except in writing signed by both the Coach and the Client.

Please sign and return this Client Agreement prior to the first scheduled coaching meeting.

Client Signature _____ Date _____