

Coaching Agreement

Please fill in this 2-page form, sign and date it. Then fax or mail a copy to Dr. Jeff Spar.

Date: _____

Client Name: _____

Address: _____

Type of Sessions (Check): Telephone _____ E-mail _____

Session Starting Date: _____

Session Day: _____

Session Time: _____

Initial Coaching Term: _____

Fee: _____

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Client and Coach agree to abide by the Coaching Policies and Procedures as listed on the policies.pdf document.

Coach Disclaimer of Liability: Client hereby employs Jeffrey F. Spar as coach for the purpose of advising and counseling Client with respect to Clients' business and personal development, interpersonal relationships and setting and achieving the Client's goals. Jeffrey F. Spar has experience in these matters and agrees to render such coaching services. Client understands and Jeffrey F. Spar agrees that he is not an employment agent, a business manager, a financial analyst or, acting in this capacity as a psychologist or psychotherapist, and that he has not promised, shall not be obligated to and will not (1) procure or attempt to procure any employment, business or sales for the Client; (2) perform any business management functions such as accounting services, tax or investment consulting, or advise with regard thereto; or (3) in this capacity act as a therapist, provide psychological counseling, psychoanalysis or behavioral therapy.

Above agreed by _____

on (date) _____

and by _____
Jeffrey F. Spar

on (date) _____