



Virtual Coaching Agreement

This document contains important information about the services you will be receiving. Please read it carefully. Before signing, ask Dr. Olivia Schlapfer Colmer any questions you may have about the contents of the agreement.

Payment and Fees

I understand that my credit card payment is due at the time of service. I understand that I am required to complete a Credit Card Authorization form with a currently active card and consent to be charged a 3% processing fee (already included in your fee).

I understand that the fee for service is as follows:

\$225 for a 60-minute individual, couples or family session.

Nature of Coaching Relationship

I acknowledge that I am entering a coaching relationship with Dr. Olivia Schlapfer Colmer through which we will collaborate to set and achieve specific, measurable goals. I understand that coaching is an action-oriented process in which Dr. Olivia Schlapfer Colmer, the coach, and I, the client, will work together to generate solutions and results. I recognize that while coaching and therapy can be similar, I will not be treated in the capacity of traditional psychotherapy practice.

Insurance

I understand that insurance will not cover the cost of online coaching services, and I, therefore, will cover the full cost of my sessions.

Privacy and Confidentiality

I understand that Dr. Olivia Schlapfer Colmer will protect my privacy to the best of her ability and keep confidential the material we discuss in my online coaching sessions.

Video Technology

I recognize that Dr. Olivia Schlapfer Colmer and I will communicate using videoconferencing technology. I acknowledge that this technology may not ensure the same level of privacy and confidentiality that in-person sessions would, and that technical issues may occur. In the event that connection troubles occur during our session, I acknowledge that Dr. Olivia Schlapfer Colmer may terminate the session at her discretion and give me the option to complete the session by phone.

I acknowledge that the online coaching format offers the following **benefits**: convenience, remote access, disinhibition, flexible scheduling. I also acknowledge the following **challenges** associated with online coaching: no full guarantee of privacy, no immediate support in the event of a crisis situation, possibility of technical difficulties.

I agree to notify Dr. Olivia Schlapfer Colmer immediately if I believe that I am not benefitting from online coaching services and need in-person support. I understand that at any time, Dr. Olivia Schlapfer Colmer may recommend that I establish a relationship with a coach or therapist in my area if I am in need of a more immediate and direct level of care.

Emergencies

I acknowledge that this is a coaching relationship, and our sessions will not address issues of a more severe or immediate nature. I am also aware that because of the remote nature of our sessions, Dr. Olivia Schlapfer Colmer will not be available to provide direct assistance in the event of an emergency. If I experience an emergency, I will independently contact 911 or go to the nearest emergency room.

Litigation Limitation

I agree that if I am involved in any legal proceedings during the course of coaching (including, but not limited to, divorce and custody disputes, injuries, lawsuits, etc.), neither my attorney nor I, nor anyone else acting on my behalf, will call on Dr. Olivia Schlapfer Colmer to testify in court or at any other proceeding. I agree to not ask Dr. Olivia Schlapfer Colmer to disclose records from my coaching sessions as part of my legal proceedings.

Termination of Coaching Services

I understand that the number of sessions and timing of the eventual termination of the coaching relationship will depend on my particular goals and the progress I achieve. I understand that I may discontinue coaching at any time. If Dr. Olivia Schlapfer Colmer or I determine that I am not benefitting from these services, I agree that either of us may elect to initiate a discussion of alternatives, which may include adjusting or changing my goals, being referred to a therapist or other professional, or terminating the coaching relationship.

I have carefully read the information in this agreement and fully understand all the areas covered.

Name (Print)

Signature
