

COACHING INVOICE/AGREEMENT

SAMPLE #2 (Program)

Name of Your Coaching Program

INVOICE

To: First Last Name
Address 1
Address 2
State or Country & Zip
email@.com
Phone Number

From: Your Company Name®
Address 1
Address #2
State, Country & Zip
Email@.com
PhoneNumber

Date: Month Day, 2011	Program: Name of Package One-on-One-Coaching	Total: \$4000.00
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If you have any questions regarding this invoice, please feel free to contact me and it will be my pleasure to assist you.

<Insert Name>

Coaching Coordinator or Coach
Name of Coach or Coordinator
<insert email>

We appreciate your business!

PROGRAM AGREEMENT

This is a Program Agreement (the "Agreement") entered into by You/Your Company Name and First Last Name ("Client"), on Month Day, 2011.

Background

On Month Day, 2011, Client accepted an invitation to join **Name of Your Program or Package**, agreeing to the terms of this Agreement and paying for The Program as noted below.

Agreement

1. Definitions:

"Name Of Coaching Program" (also referred to herein as "The Program") consists of a four (4) month coaching time period, with fifteen (15) proactive one-on-one (45-minute) telephone sessions with a *Name of Program Coach* and unlimited support from the Coach and the Coaching Division. The program also includes:

- Customized Program Design To Meet Your Goals
- Unlimited Email Support
- Four check-in Sessions (10 minutes each)
- Other Value

"Coach" means an individual certified by *Name of Company* to deliver The *Name of Program Coaching Program*.

"Coaching Division" means the team of *Name of Company Coaches*.

2. Client has paid **Company Name** the amount of **\$4000.00** via **VISA** credit card ending in xxxx (authorization #xxxx), on **Date** for **The Your Program Name® Coaching Program**, and is therefore paid in full.

3. Client acknowledges that *Program Name® Coaching Program* is an educational program and that the results realized are ultimately based on the Client's own personal commitment to success and the actions he or she does or does not take. Client agrees to make a personal commitment to put forth their best effort in order to successfully complete The Program. Client agrees to complete assignments in a timely manner, to attend all scheduled sessions, and to participate fully. Should Client need to cancel a scheduled session, Client will give at least 24-hour written notice, which may be provided by email.

4. The Coach will make every effort to accommodate schedule changes as quickly as their schedule permits, whenever appointments cannot be met and 24 hours notice has been given. The Coach may move an appointment due to mitigating circumstances. If such change is necessary, Coach will provide as much advance notice as possible.

5. Coach warrants *Name of Program® Coaching Program* as follows. The Client will receive quality, expert coaching in the area of *describe the nature of the coaching here*. The Program will be customized to the Client and their personal needs. Client will be working with an experienced Coach who acts as a resource for the Client. The Coach will be available to the Client, throughout The Program, to respond in a timely manner. If the Coach fails to meet these

promises, the Coach will remedy the situation by extending the program length so as to fulfill the promises going forward. Client's failure to come to coaching sessions prepared, to follow-through on coaching assignments or to attend scheduled sessions will void this warranty.

6. Both Parties acknowledge that The EnWaken® Coaching Program is educational in nature. It is not meant as therapy nor is it psychological treatment in design, intent, or methodology. It is not a substitute for medical treatment, psychotherapy, or treatment program. Because some people may, contrary to our recommendation, participate in The Program as a way of dealing with issues that are properly addressed by health professionals, the Coach specifically states, and Client acknowledges that *name of company* Coaches are extensively-trained educators in *energy coaching* and are not mental health professionals.

7. Client understands that refunds are available only upon completion of the program agreement: If client, after fully participating in the program, following through on assignments, attending all sessions within the agreement time frame and giving it 100% of their effort, determines he/she is not satisfied, up to 100% of monies paid will be refunded.

8. The Coach does not function as personal accountant, lawyer, or financial advisor for the Client. If the Client has tax or legal questions, Client will need to seek advice from a licensed professional. Client agrees to release the Coach, staff, and affiliates from any liability, in this regard.

9. As part of registration into The Program, Client will receive from the Coach an email, containing a Personal Profile Package that includes an important profile questionnaire. The Client agrees to fill out and return the profile questionnaire. Both parties acknowledge that work cannot commence without this questionnaire being completed and returned.

10. The Client acknowledges being advised of and agreeing to all the above provisions of this Agreement on the date set forth above. Client is further aware that the Coach requires them to sign this Agreement using the online signing service, Docusign, as the Coach requires receipt of this executed Agreement prior to work commencing.

In witness whereof, the Parties have executed this Agreement as of the date set forth above.

Company Name
Name & Title

First Last Name

Signed: _____

Signed: _____

Address for Notice:

First Last Name

Address 1

Address 2

State or Country & Zip

email@.com

Phone Number

This is for informational purposes only. To create a legal document to serve this purpose, consult an attorney. This information is in no way endorsed by the party you've received it from.