

Parent Coaching Agreement



I am honored to work with you and your family. This agreement outlines what you can expect in our time together. I am committed to helping you achieve your vision for you and your family.

Coaching Services

As your coach, you can expect me to:

- Encourage exploring changes that will improve your family life.
- Support you in setting parenting goals and taking the steps to meet your goals.
- Provide careful listening, powerful questions and honest feedback.
- Respect the confidentiality of this agreement and what is shared in our time together.

As my client, I expect that you will:

- Be honest with yourself and with me.
- Commit to goals that are meaningful to you.
- Take ownership for your progress and your accomplishments.
- Be responsible for your coaching time and activities.

Payment Procedures

Payments for all services are required in advance or at the scheduled appointment. Payment can be made by check, cash or credit card through PayPal.

Session Time

A scheduled time will be mutually agreed upon. I will call you at the designated time.

Cancellation Policy

My time and your time are valuable. Cancelled appointments require a minimum of 24 hours' notice or are subject to your session fee not being refunded except in true emergencies.

Confidentiality and Informed Consent

I protect the confidentiality of all my clients. I will only release information about our work with your written permission or if I am required to do so by a court of law.

Breaches of confidentiality, in which I am obligated to report confidential information, are specific in only two instances:

- (1) If I have information that indicates that a child, elderly or disabled person is being abused or neglected I am obligated by law to report this information to the appropriate local agencies for the protection of that person.

(2) If a client is in imminent risk to him/herself or makes threats of imminent violence against another person, I am required by law to report this to the appropriate local agencies for protective action.

Though these situations rarely occur in coaching, if they do occur, I will do my best to communicate in advance any necessary and legally obligated protective action that I need to take.

Coaching and Psychotherapy

Parent coaching sessions focus on decreasing your stress by learning new ways to manage challenging situations with your children. The goal is to help you gain confidence in your parenting decisions. Parent coaching also works to improve the relationship between you and your children using respectful strategies and positive discipline.

Psychotherapy is a health service that includes mental health practitioners with training and experience in diagnosing and treating emotional and psychological problems. The coaching provided does not include psychotherapy or any other health care service.

Coaching Commitment

Though at times it may feel like a close personal relationship, the coaching relationship is a professional relationship that does not extend beyond professional boundaries either during or after our work together.

As the coach, my job is to further build and develop the parenting skills and knowledge you already possess and to assist you in decisions about making changes. I will be honest, direct, and at times challenge you in ways that might feel uncomfortable.

As the client, you will set the focus of the coaching sessions and determine how much change you are willing to make. You will be expected to be honest about your progress and to discuss concerns should the coaching relationship not be meeting your expectations. Coaching does not offer any guarantee of success or definitive changed behavior of your child.

By registering for a coaching session, you agree to the following:

1. I agree to all terms and conditions above. I am committed to working towards my parenting goals.
2. I understand that parent coaching is a comprehensive process that may involve or touch on many areas of my life including work, finances, health, relationships, education and recreation. I acknowledge that deciding how to handle these issues and implement any changes is exclusively my responsibility.
3. I understand that coaching does not involve the diagnosis or treatment of mental disorders as defined by the American Psychiatric Association. I

understand that coaching is not a substitute for counseling, psychotherapy, psychoanalysis, mental health care or substance abuse treatment. I will not use it in place of any form of diagnosis, treatment or therapy.

4. I promise that if I am currently in therapy or otherwise under the care of a mental health professional, that I have consulted with the mental health care provider regarding the advisability of working with a coach and that this person is aware of my decision to proceed with the coaching relationship.

Your registration indicates that you have read the information in this agreement and agree to abide by its terms and conditions during the professional coaching relationship.

I appreciate your trust and the opportunity to work with you!

Warm Regards,

Kathy Slattengren

Kathy Slattengren, M. Ed.

I/We have read this document in its entirety and agree to all of the above.

Please print, then sign your name:

➤ _____ Date: _____

➤ _____ Date: _____