



Arts4Evolution

Informed Consent for Expressive Life Coaching

This agreement addresses a contract for coaching between the following parties:

Client: (print name) _____

and **Deb Ogburn**, REAT, Expressive Life Coach

About Your Coaching: Throughout your coaching we will be using Expressive Arts—a powerful medium that may contact deep feelings and raise large questions. I am trained to help you by offering myself as a resource and by helping you to find your own inner resources to work with any issues as they arise. Feelings and questions will arise from and be addressed through artistic media in the imaginal realm. Expressive Life Coaching is solution-focused, but is not a “problem solving” process. It is, rather, a way to become aware of your own resources. I will not interpret your art or give you solutions. I am here to give support and open the play space we all need to grow, heal and make meaning. Art is offered as a safe container for your growth and progress towards achieving your goals.

Photography/Video: I sometimes use photography or video to document your work so that we can reflect back on it during or after the session. I will always ask your permission and it is your right to refuse if this makes you feel uncomfortable. Photos of you and/or your work are a part of your confidential file and will never be shared or published without your consent.

By signing here, you indicate that you have read and understand the above information and that you have had any questions concerning this document answered..

Client Signature _____ Date _____

Coach Signature _____ Date _____

Confidential Client Information

Name _____ Date of Birth: _____

Address _____

City _____ State _____ Zip _____

Preferred Phone: _____ Alternate Phone: _____

Email Address _____

Occupation: _____

Employer: _____ How long? _____

Relationship status / living situation: _____

Spouse / Partner Name: _____

Children (Names and ages): _____

Name of person responsible for payment of this account: _____

Phone: _____ Relationship to you: _____

Emergency Contact: Name _____ Phone: _____

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Why are you seeking Life Coaching at this time? _____

What goals would you like to accomplish during our time together? _____

Although prior experience is not necessary, it is helpful to know about your participation in the arts:

Dance: _____

Music: _____

Visual Arts: _____

Literary Arts: _____

Theater: _____

Is there any additional information you feel I should know about you, ie: allergies (latex, paint, dust, etc.), medical/ psychological diagnoses, current medications, substance use, other? _____

Payment and Cancellation Policy

Payment for individual sessions is due at the time of service unless other arrangements have been agreed upon.

Accepted forms of payment include cash, check payable to Deb Ogburn,

PayPal or Venmo to DLOgburn@gmail.com.

If you need to cancel or reschedule, please call at least 24 hours in advance.

If I do not hear from you in a timely manner, I will expect payment for the scheduled session.

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I have read the above and agree to pay for appointments missed without 24-hr. advance notification.

Signature _____ Date _____