

NUTRITION COACHING AGREEMENT

Between Registered Dietitian Carlene Thomas RD and Client:

| | n are made a part of this Agreement. In consideration of our of a coaching sessions, you agree to the following: |
|---|--|
| do so at least 24 hours in advance or you will | adhere to your appointment. If you need to reschedule, please be charged for the full coaching session. You will also be charged than ten minutes late. There is flexibility for emergencies. If ou will be charged the full appointment fee. |
| Carlene@CarleneThomas.com or text messag | er our most recent session, you have access to me at ging between scheduled sessions. Please do not hesitate to emai v. You will not be billed for any email responses requiring under |
| FEES AND PAYMENT You agree to the designated fees at the time of in advance of services. | of purchase. Payment is made through Pay Pal and must be made |
| | tial unless I receive your advance permission to disclose or excep and information exchanged is confidential under HIPAA code. |
| productive coaching can occur. You know as the sole responsibility to contact your physical health reasons. You recognize that any activities, which you the Client agree to accept in a Thomas RD, its officers, directors, agents and your participation in coaching activities, including a decision, action or outcome based on and results or participation in coaching activities and receive the same benefit. You agree that Coaching for any reason, including the following | onnaires/food logs/other assessment material on a timely basis so a Client you are responsible for the actions you take. You have ian for approval for participation in coaching if coaching is for ty in which problems/life situations are discussed bears some its entirety. You agree to hold harmless and indemnify Carlene I representatives from any liability whatsoever resulting from uding but not limited to medical expenses. You accept the risk the coaching relationship. You acknowledge that expectations ities vary among individuals and that each individual may not the may discontinue services to you upon notification to you in ag: your failure to cooperate to the best of your ability in the not of fees within 5 days of the due date. Client shall provide at wishes to discontinue coaching services. |
| COACH Carlene Thomas RD | CLIENT |
| | \times |
| | Date: |