

Client Welcome Packet

Coaching & Pastoral Care

This packet contains:

1. Coaching & Pastoral Care Agreement
2. Client Intake & Consent Form

Coaching & Pastoral Care Agreement

1. Nature of Services

Services are provided as pastoral counseling and Christian life coaching within a biblical framework.

Coaching and pastoral care focus on growth, discipleship, and personal/spiritual development.

Services are not licensed psychotherapy or medical treatment. The Coach is not a state-licensed mental health professional.

If at any point clinical therapy or medical services are appropriate, referrals may be offered.

2. Ethical Standards

As a credentialed member of the International Board of Christian Care (IBCC), I am committed to the AACC Y-2023 Code of Ethics for Christian Counselors and Coaches.

This includes commitments to:

- Compassion, competence, and integrity in care.
- Informed consent, client dignity, and confidentiality.
- Avoiding harm, exploitation, or dual relationships.
- Clear communication of my role as a pastoral counselor and coach, not as a licensed clinician.

3. Consent & Acknowledgment

The Client voluntarily enters into this coaching relationship.

The Client understands results are not guaranteed and depend on their own commitment, actions, and follow-through.

The Client retains full responsibility for personal choices, actions, and outcomes.

4. Confidentiality

Coaching conversations and records are kept confidential.

Exceptions where disclosure may be required by law:

1. Threat of harm to self or others.
2. Suspected abuse/neglect of children, elders, or vulnerable adults.
3. Court order or legal requirement to disclose.

If the Client wishes information shared with a third party, a written Release of Information must be signed.

5. Non-Subpoena Agreement

The Client agrees not to subpoena the Coach, coaching notes, or records for any legal proceedings.

Coaching and pastoral care are for spiritual growth and support, not legal evidence.

6. Fees & Payment

Sessions are 50 minutes at \$120 per session (or package: 10 sessions for \$1000).

Payment is due at booking or prior to each session.

All payments are non-refundable. Sessions must be used within 12 months of purchase.

7. Cancellations, Tardiness & Missed Sessions

At least 24 hours' notice is required to cancel or reschedule.

Cancellations with less than 24 hours' notice, or no-shows, will result in forfeiture of the session and full fee charged.

If the Client is late, the session will still end at the scheduled time, and the full fee applies.

8. Termination of Coaching

Either party may end the relationship at any time with written notice.

A "no-fault exit" clause applies: if either party believes coaching is no longer beneficial, the relationship may be respectfully ended.

Referrals to other professionals may be provided if appropriate.

9. Release of Liability

The Client acknowledges that coaching may involve personal reflection and emotional discomfort.

The Client releases the Coach and any affiliated organizations from liability for any emotional distress, actions, or outcomes resulting from coaching.

The Client understands coaching is not a substitute for therapy, medical treatment, or crisis services. In emergencies, the Client must call 911 or appropriate emergency services.

10. Ethics & Professional Standards

The Coach commits to uphold professional ethics (e.g., AACC Code of Ethics).

If the Client has concerns or complaints, they agree to first address them directly with the Coach.

If unresolved, the Client may seek resolution through the Coach's professional association or other agreed means.

11. Communication & Technology

Between sessions: limited email/text for scheduling or brief check-ins; substantive coaching is reserved for sessions.

Client may consent to receive appointment reminders via text/email.

Electronic communication is not fully secure for sensitive disclosures.

12. Governing Law

This Agreement shall be governed by and construed in accordance with the laws of the State of Texas (or state where services are provided).

Acknowledgment & Consent

By signing below, the Client confirms:

- They have read, understood, and agree to this Agreement.
- They understand that coaching is not licensed therapy or medical treatment.
- They are personally responsible for their own decisions and actions.

Client Signature: _____ Date: _____

Printed Name: _____

Coach Signature: _____ Date: _____

Printed Name: _____

Client Intake & Consent Packet

Client Information

Full Name: _____
Date of Birth: _____ Age: _____ Gender: _____
Address: _____
Phone: (Home) _____ (Cell) _____
Email: _____
Preferred method of contact: ☐ Phone ☐ Text ☐ Email

Emergency Contact

Name: _____
Relationship: _____
Phone: _____

Background Information

Marital/Relationship Status: ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed
Children (names & ages): _____
Occupation/Employer: _____
Health/Medical Notes (optional): _____
Current Medications (optional): _____

Faith Background

Religious Affiliation/Denomination: _____
Current Spiritual Involvement: _____
Recent changes in faith or spiritual life: _____

Coaching Goals

What led you to seek coaching at this time? _____
Primary goals/areas of focus: ☐ Personal Growth ☐ Spiritual Development ☐ Relationships
☐ Parenting ☐ Career ☐ Emotional Well-being ☐ Other: _____

Consent & Confidentiality

I understand that coaching and pastoral counseling are not licensed mental health services.
I consent to receive coaching focused on growth, goal achievement, and spiritual care.
I understand my information will be kept confidential, except when disclosure is required by law (harm to self/others, abuse, court order).
I understand I may request access to my records, and any sharing of information requires my written consent.

Acknowledgment

I have read and understood this Intake & Consent Packet.
I affirm that the information I provided is accurate to the best of my knowledge, and I

consent to coaching and pastoral care under the terms provided.

Client Signature: _____ Date: _____

Printed Name: _____

Coach Signature: _____ Date: _____

Printed Name: _____