

## Integral Lifework Coaching Disclosure & Agreement Form

Welcome to **Integral Lifework**. Please read this Agreement carefully before signing it. The undersigned **Client** (and Parent/Guardian) acknowledges they have received and understand the following information:

**Integral Lifework** is a collaborative, self-empowering, holistic approach to personal development and interpersonal health and wellness. The intention of **Integral Lifework** is to engage the **Client** on every level – physical, emotional, mental, spiritual, cultural and social – and to provide a number of assessment methods, personal disciplines and formalized treatments that address mutually agreed upon goals, explore a fuller awareness of self and self-nourishment, overcome barriers to wholeness, and enhance a conscious and compassionate way of being. The **Integral Lifework Coach** agrees to provide professional services in accordance with training and experience, with focused effort and attention during scheduled consultations to facilitate the **Client's** benefit.

**Integral Lifework** draws on the theory and application of psychosocial, cognitive, somatic and spiritual techniques developed and/or refined by T.Collins Logan. These include, but are not limited to: relaxation, visualization and breathing exercises; introspective meditation; active memory reorganization; journaling; intuitive development; spiritual perception-cognition; family dialogue; revising patterns of work, diet, exercise and sleep; bodywork and somatic therapies; energetic therapies; evaluating relationships, lifestyle choices and living environments; community involvement; interpersonal communication; and both guided and unguided assessment instruments. The **Client** may be instructed in cognitive, physical, spiritual and/or social activities to address issues that have been jointly agreed upon by the **Client** and the **Integral Lifework Coach**. **Clients** may also be encouraged to consult other specialists to assist them in one or more areas. The objective is to provide lasting results, using a client-centered approach that encourages self-sufficiency in ongoing application of learned techniques. This may be formalized into an individualized **Lifework Plan**.

All services provided do not include the practice of medicine or psychotherapy, and an **Integral Lifework Coach** is not a licensed physician or therapist. These services are non-diagnostic, and are complementary to Healing Arts and Educational services licensed by the state. The California State Legislature has determined that state licensing may not be conferred upon an occupational group for purposes of status or prestige. The primary function of licensing laws for legally defined Healing Arts and Mental Health professionals is to protect public health and safety. Currently, **Integral Lifework Coaches** are not issued licenses by any State Governmental Agency to engage in their professional services.

Confidentiality of **Client** information will be maintained at all times, and electronic transmission of data will be safeguarded to the **Coach's** best ability. However, the Client should avoid transmitting sensitive information via phone, e-mail, fax or web, and instead communicate it directly and in person with their **Coach**.

**Todd Collins Logan, Integral Lifework Coach**, has acquired the following education, training, experience, and qualifications to perform the services offered to his **Clients**:

- Over twenty years of interdisciplinary study, practice and refinement of multidimensional techniques.
- Development of **Integral Lifework** transformative practice, along with related tools and metrics.
- Successful completion of alternative Healing Arts certifications with over ten years in practice.
- Former ATP Professional and AAMFT Affiliate, with continued adherence to the values, goals and ethical practice standards of these organizations.
- Research and publication of several works on psychology, spirituality and integral theory.

I, the undersigned **Client** (and Parent/Guardian) acknowledge that I understand this information, have had any questions answered, and that I have been given a copy of this **Disclosure & Agreement Form**.

**Client Name:** \_\_\_\_\_ **Parent/Guardian:** \_\_\_\_\_.

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_ **Address:** \_\_\_\_\_.

**Client & Parent Signatures:** \_\_\_\_\_ Today's Date: \_\_\_\_\_.

*(\*\*\*Please provide a scanned copy of your current State ID or Driver's License along with this Agreement\*\*\*)*