



Client Agreement and Release Form

I, _____, understand that yoga and holistic Nutrition Therapy is not intended as a form of prescription, treatment, diagnosis or cure for any disease, be that disease mental or physical, and is not meant to substitute regular medical care. A Nutrition Therapist does not perform any medical procedures nor does she prescribe medications.

I, the undersigned, understand that Katherine M. Coleman is a Master Nutrition Therapist educated at the Nutrition Therapy Institute, an accredited private college. I understand the services provided by Ms. Coleman may include but will not necessarily be limited to: nutritional evaluation, balanced diet planning, instruction in the development of eating habits, physical exercises, rest, healthy home and workplace environments, attitudinal and behavior changes. Ms. Coleman can provide help with understanding lifestyle and nutritional matters, and how diet, supplements, and lifestyle may assist general wellbeing.

I have informed Ms. Coleman of all my known physical and medical conditions, as well as any medications and supplements I am taking and will keep Ms. Coleman informed of any changes. I agree to policies and rates payable to Ms. Coleman's that are outlined on the following pages. **This agreement is being signed voluntarily and not under duress of any kind.**

Name: _____

Address: _____

City, State, Zip: _____

Daytime phone: _____ Email: _____

Signature: _____ Date: _____

Company Policies

Fee Structure // ***Payment is due before or at the time of service.**

- Individual nutritional services and yoga sessions at location are \$120/ session unless a package has been purchased.

*Exceptions apply to services that require Ms. Coleman to step outside the office setting and drive to a home/ grocery store/ other relevant location. Pricing is based individually upon mileage/ gas/ time, etc. Average fee is an additional \$15

- Four initial consultations after an initial consult (within a two-month time period) are necessary to reach any wellness goals.

- Text and e-mail support is a \$135 fee

- A personal nutritional consultation for two people costs \$160/ session

- A private in-home or at location consultation session for three costs \$180/ session

- Personal consultation 4-Pack for \$400 (Includes initial review, report of findings, diet plan, and two follow up consultations [generally 45 minutes to an hour each])

- Personal consultation 10-Pack costs \$925

- Initial nutritional review, diet plan, and consultation is generally 1 hour (1.5 hours per family)

- Follow-up sessions are generally 45 minutes to one hour

- Pricing and packages may be done on an individual basis determined by services sought after or existing conditions.

- PREPAID PACKAGES ARE NON-REFUNDABLE.

Client's Initials _____



Missed Appointments

- A 24-hour notice for cancellations is required.
- For cancellations made the day of the appointment there will be a \$25 charge.
- Please arrive five minutes before your session. Late appointments will not be extended and the fee for the original appointment will be charged.
- A "NO SHOW" APPOINTMENT WILL BE CHARGED FULL PRICE.

Discontinuation of Service

- Should service be discontinued for any reason, any outstanding balance is immediately due and payable.

Professional-grade Supplements and/ or Products

- All products must be paid for at the time of purchase.
- Unopened products may be returned or full refund within 60 days of purchase.
- Products are not included in the consultations fee.

Client's Initials _____

