



Recreational Sports

Student Affairs

UNIVERSITY OF GEORGIA

Wellness Coaching

New Client Schedule Form

What is Wellness Coaching?

Wellness coaching supports an individual's own motivations and strengths. Clients will map their path for positive behavior change (s) through a collaborative, unbiased partnership.

A Wellness Coach will work with you to:

1. Set and achieve personal goals
2. Initiate and sustain wellness behaviors
3. Balance dimensions of health and wellbeing
4. Learn resilience and coping skills
5. Identify potential barriers to change and develop strategies to move forward

This section to be completed by Client prior to payment.

Submission does not guarantee immediate service.

Client Name: _____ UGA ID #: _____

Client Phone: _____ Client E-mail: _____

Returning Client (circle): Y / N Wellness Coach Name (if applicable): _____

Top 3 preferred session days and times (be as specific as possible for expedited service):*

1. Day: _____ Times: _____

2. Day: _____ Times: _____

3. Day: _____ Times: _____

***Client assignment is based on coach/client availability and special requests.**

Assignment and initial contact may not be immediate.

Wellness Coaching Packages:

*Each package includes an initial consultation (1 hour in length) prior to the first wellness coaching session. No refunds will be issued after initial purchase.

Alumni, Affiliates, Dependents:

- 6 sessions (\$180)
- 12 sessions (\$315)
- 20 sessions (\$440)

OFFICE USE ONLY (To be completed by receptionist):

New Client Forms Completed?

- Wellness Coaching Packet

Receptionist Name: _____



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Wellness Coaching Policies and Procedures

1. Wellness Coaching is a comprehensive process that may involve all areas of life, including work, finances, health, relationships, education, and recreation. Deciding how to handle these issues and implement my choices is exclusively the Client's responsibility.
2. Wellness Coaching is not to be used in lieu of professional advice. I will seek professional guidance for legal, medical, financial, business, spiritual, or other matters. I understand that all decisions in these areas are exclusively mine, and I acknowledge that my decisions and my actions are my responsibility.
3. Wellness Coaching is not psychotherapy or any form of medical treatment, professional referrals will be given as needed.
4. If a Client is currently in therapy or otherwise under the care of a mental health professional, they should consult with this person regarding their desire to work with a Wellness Coach.
5. Certain topics may be anonymously shared with other Wellness Coaching professionals for training or consultation purposes.
6. Wellness Coaches will follow current National Board of Health & Wellness Coaches (NBHWC) guidelines.
7. All Clients must be 18 years of age or older.
8. Clients may register for Wellness Coaching sessions in the Recreational Sports office or online.
9. New client schedule forms must be completed and submitted to the Recreational Sports office or online with payment. Online payments will be collected at <https://shop.recsports.uga.edu/>.
10. Clients must submit Wellness Coaching packets to the Recreational Sports office at least 3 days prior to the initial Wellness Coaching session.
11. There is no guarantee that a specific Wellness Coach will always be available with each session or package purchased.
12. The Wellness Coach and the Department of Recreational Sports reserve the right to refer to a licensed medical professional if necessary.
13. Clients should immediately communicate any concerns arising from their Wellness Coaching sessions with the Wellness Coach or Assistant Director for Fitness & Wellness.
14. Wellness Coaches will contact the Client to schedule the initial consultation.
15. The Client will meet the Wellness Coach at the mutually agreed upon place inside the Ramsey Student Center or via Zoom.
16. Sessions must be scheduled prior to the first sessions and may be rescheduled based on Client-Wellness Coach agreement.
17. During the initial consultation the Client is encouraged to ask the Coach questions to ensure both parties have a clear understanding of the expectations in the Coach-Client relationship.
18. Should the Wellness Coach arrive late, the Wellness Coach must make up the time lost with the Client at no additional charge. If the Wellness Coach must cancel a session, he or she will notify the Client one day in advance.
19. Late Clients will forfeit any session time lost based on his or her tardiness. Wellness Coaches will wait no longer than 15 minutes for Clients. After 15 minutes, the session will be forfeited. Clients must provide cancellation notification at least 1 day in advance, or forfeit the session. No refunds will be issued.
20. Sessions purchased must be used within a 6 month period, after which they will be voided. Unused sessions will not be refunded.
21. A Client Satisfaction Survey will be e-mailed to the Client following the completion of each package purchased.
22. The Department of Recreational Sports reserves the right to adjust the schedule under any circumstance. The Client will be notified under such circumstances.
23. To receive optimum benefits from the program, a minimum of 1 session every two weeks is recommended.
24. All Wellness Coaching activities are subject to Ramsey Center facility policies in the event of an emergency situation or inclement weather.



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Wellness Coaching Client Agreement

The guidelines provided below are designed to ensure the relationship between the Wellness Coach and Client are clearly appreciated and understood.

Wellness Coach Responsibilities:

1. Perform initial client consultation to determine specific goals and needs.
2. Assist the Client in setting and achieving S.M.A.R.T. personal goals.
3. Help the Client to initiate and sustain wellness behaviors and balance dimensions of health and wellbeing.
4. Assist the Client in identifying potential barriers to change and develop strategies to move forward using resilience and coping skills.
5. Encourage, motivate, and support the Client in his or her identified goals while holding them accountable to their own personal goals.
6. Wellness Coaches must make up any lost time due to their tardiness with the Client at no additional charge.
7. If the Wellness Coach must cancel a session, he or she must notify the Client in writing 1 day in advance.
8. All Wellness Coaches employed by the University of Georgia Department of Recreational Sports and may not accept direct or personal payment for his or her services.
9. All information will remain confidential unless written permission is given by the Client. Wellness Coaches are subject to the Clery Act, UGA's NDAH Policy, and UGA's Mandatory Reporter policy requirements.

Client Responsibilities:

1. Payment must be made out to the University of Georgia and should be received prior to the first Wellness Coaching session. Clients must not compensate Wellness Coaches directly for their services. No refunds will be issued.
2. All purchased sessions must be scheduled prior to the first session and may be adjusted based on Client-Coach agreement.
3. Clients must adhere to all facility policies and procedures as agreed upon when completing the facility paperwork.
4. Clients will lose session time based on his or her tardiness. Wellness Coaches will wait no longer than 15 minutes for Clients. After 15 minutes, the session will be forfeited.
5. Clients must provide cancellation notification at least 1 day in advance, or forfeit the session.
6. Clients must complete their Wellness Coaching Packet prior to completing the first session with a Wellness Coach.
7. Clients must immediately communicate any concerns arising from their Wellness Coaching sessions with the Wellness Coach or Assistant Director for Fitness & Wellness.
8. Sessions purchased must be used within a 12 month period, after which they will be voided. Unused sessions will not be refunded.
9. Clients must abide by all Department of Recreational Sports rules and regulations. Failure to do so may result in the removal or denial of service to the Client without refund.
10. By signing below, the Client acknowledges and agrees that Wellness Coaching does not diagnose or treat mental health disorders as described by the American Psychiatric Association. The Client understands that Wellness Coaching is not a substitute for counseling, psychotherapy, psychoanalysis, mental health care, or substance use disorder treatment, and it will not be used as such. The Client agrees that during a coaching session, the Wellness Coach may make recommendations for increased health and well-being and these recommendations should be carefully evaluated by the Client and their health care professionals to determine the appropriateness for the individual Client. The Client agrees that if they are currently under the care of a health care professional or currently prescribed medications, they will consult with the professional before making any health-related changes including the discontinuation of any prescription medications.

I clearly understand the roles and responsibilities described above:

Date: _____

Client Signature: _____

Wellness Coach Signature: _____



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Wellness Coaching Client Information

General Client Information

First Name: _____ Last Name: _____

Phone: _____

E-mail: _____ UGA ID: _____

Sex: M/F Age: _____ DOB: ____/____/____

Primary Care or Attending Physician: _____

Physician Phone: _____

Physician Address: _____

Emergency Contact Name: _____

Emergency Contact Relation: _____ Emergency Contact Phone: _____

Goals & Expectations

Goals should be SMART (Specific, Measurable, Achievable, Realistic, and Time bound)

Please identify your:

Short-term goals (first 4 weeks):

Long-term goals (first 6 months-1 year):

Life-long goals:

Please consider your goals carefully.

Your Wellness Coach can help you set S.M.A.R.T. goals if you are unsure.



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Wellness Coaching Client Information

Get to Know You Questions—Personal

What do you hope to get from Wellness Coaching?

What apprehensions do you have about Wellness Coaching?

What is the “best” way for your coach to coach you?

What are three things you would like your coach to know about you?

1.

2.

3.

What must occur during your life to consider it a life well lived?

What gives you a sense of purpose in life? What activities have meaning for you?

What’s missing in your life, the presence of which would make your life more fulfilling?

What do you do when you are faced with a really tough situation in your life?

What activities or experiences bring you happiness and joy? To what frequency do you do these?



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Wellness Coaching Client Information

Get to Know You Questions—Health & Wellness

Your coach's job is not to "treat" you, but to be your ally and your resource. They will help you explore potential steps towards greater health and well-being. The coach may refer you to medical, psychological, nutritional and other health/wellness-related services for more information and to seek any treatment in these areas. Please share information about your health and wellness so that your coach may more fully understand your challenges and aspirations for achieving well-being.

Describe your lifestyle and what you currently do to be healthy and well:

Describe any health challenges that you currently experience:

Are you currently on any medications? If so, what is the intended impact of the medication?

What do you do to prevent, reduce, and treat stress in your life?

Describe your current weekly nutrition/exercise routine:

How can your coach assist you in making the lifestyle changes you want to make?

What is one step that you could take immediately that would make the greatest difference in your health and well-being?

1. _____



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FOR OFFICE USE:
of Sessions: _____
Amount Paid: _____
Payment Method: _____
Cashier's Initials: _____

WELLNESS COACHING AUTORIZATION TO RECORD

Name: _____

UGA ID: _____

Authorization to Record Wellness Coaching Sessions

(Read carefully before signing)

The Department of Recreational Sports provides a variety of services to members of the Ramsey Student Center. It also is a teaching, training center for University of Georgia students. The Department of Recreational Sports therefore requests your permission to make audio and/or video recordings of the sessions conducted with you at by the Department of Recreational Sports employees for training and educational purposes. No recording will be done without your permission to do so. By signing this authorization, you permit the Department of Recreational Sports to make audio and/or video recordings of your sessions with the Department of recreational Sports employed Wellness Coaches, and you authorize the recordings to be viewed by the staff supervising the Wellness Coaches providing services for the Department of Recreational Sports.

You may change your mind and revoke this Authorization at any time, including during a session, except to the extent that the Department of Recreational Sports has already acted based on this Authorization. Refusal to sign will not affect your ability to obtain services or treatment. The digital audio and/or video recordings will be deleted after they have served the training and educational purposes as described above. This Authorization will expire after one (1) year from the date below, unless revoked earlier by you.

Clients may be assured that their contacts remain confidential within the Department of Recreational Sports except in instances in which, (a) the client, in the professional judgment of the full-time staff supervisor, expresses serious intent to harm him/herself or someone else, or (b) the full-time staff supervisor learns of or suspects child abuse or elder abuse, or (c) there is a court order requiring the release of information, or (d) the client has provided his or her authorization for disclosure.

Your signature below indicates that you have agreed to be audio and/or video recorded under the conditions described above.

SIGNATURE OF PARTICIPANT

DATE