

Agreement

Please review, adjust as necessary, sign where indicated and return to the coach. Putting this in writing strengthens one's dedication.

NAME			
INITIAL TERM	_____ MONTHS, FROM _____	THROUGH _____	
FEE	\$_____ PER HOUR	\$_____ PER MONTH	\$_____ FOR THE PROJECT
PAYMENT	FEES TO BE RECEIVED IN THE OFFICE BY THE _____ OF THE MONTH		
BONUS AGREEMENT			
SESSION DAY	<input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN		
SESSION TIME	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> PACIFIC <input type="checkbox"/> MOUNTAIN <input type="checkbox"/> CENTRAL <input type="checkbox"/> EASTERN		
DURATION	_____ MINUTES		
CALL PROCEDURE			
SERVICES PROVIDED			
FOCUS OF WORK			
GROUND RULES	1. CLIENT CALLS THE COACH AT SCHEDULED TIME 2. CLIENT PAYS COACHING FEES IN ADVANCE 3. <input type="checkbox"/> CLIENT <input type="checkbox"/> COACH PAYS FOR LONG DISTANCE CHARGES, IF ANY		
OTHER TERMS			
ABOVE AGREED TO ON _____			
CLIENT SIGNATURE			
COACH SIGNATURE			

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