NOA'S COACHING

Empowering Human Relationships through Leadership and Communication

INTAKE FORM

Name:	Date:	
Address:		
Phone:		
In case of emergency call:		
Name:		
Phone:		
E-mail address:		
Occupation:		
How did you hear about our services?		
Reason for coming to Noa's Coaching:		
Other areas of interest: (Please circle any which ap		
•Career/ Work		
•Health/Wellness		
•Leadership Growth		
•People/ Relationships		
•Personal Growth		
Public Speaking		
•Wealth/ Money		
Areas you may wish to improve (not listed above):	:	
Please list (if any) medication you are currently tal	king:	
Please note any treatment(s) you are currently rece	eiving from ANY health care p	provider(s):

Pursuant to California Business and Professional Code, Noa's Coaching makes the following disclosures: We are professionals who provides services that are alternative and complementary to the healing arts services licensed by the state. Each client will be interviewed and if it is determined that the services we provide can be of benefit, we will provide services in accordance with the education, training, and experience we have.

We offer the following services:

Coaching - This "is a process that enables learning and development to occur and thus performance to improve. To be successful, a coach requires knowledge and understanding of process as well as the variety of styles, skills and techniques that are appropriate to the context in which the coaching takes place." (Parsloe, 1999)

These services are not licensed by the state. The services do not include the practice of medicine or psychology or any other healing art, since we are not licensed physicians.

We have the following education, training, experience and other qualifications regarding the services provided:

- •Business Coaching
- •Catharsis Application Program (NLP)
- •Life Coaching
- •Hypnotherapy
- •Neuro-Linguistic Programming (NLP)
- Quit Smoking Hypnosis
- •The 7 Steps to Reprogramming Your Mind

If you have any concerns or complaints about	1 /1 1
I, (please print your name) provided with the above information, have rea	, hereby acknowledge that I have been d such, and have received a copy of this disclosure.
Client signature:	
Date:	