

## Emmett E Miller, MD

Mind/Body Medicine . EMDR . Stress
Management
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## **Coaching Agreement**

The purpose of this document is to clarify the nature of my coaching/educational contract with Emmett Miller

I understand that all my appointments and other communications are for the express purpose of education and/or coaching. My expectation of Dr. Miller is that he provide experience, knowledge, training and guidance that will allow me to best utilize my own resources for managing stress, improving health, creating wellness, and optimizing my performance. This may be done through discussion, guided imagery, audio/visual materials and other coaching approaches to developing my inner capacity for self-healing and peak performance. I accept full responsibility for the choice of whether to utilize any of Dr. Miller's suggestions, or to apply any of the principles I have learned from him.

I understand that Dr. Miller will not be providing medical or psychiatric care during these interactions. He will not make diagnoses, perform medical examinations or procedures, nor will he prescribe medication or other medical or psychiatric treatment. I agree to meet all financial responsibilities promptly and understand that I will not receive reimbursement from my medical insurance carrier.

I understand that if I have, now or in the future, need for any medical, psychiatric, psychological or any other professional health service, I will take the responsibility to find an appropriate physician, therapist or qualified helping professional for such needs.

I am the expert in my own life. I acknowledge full responsibility for myself and my choices, and agree to wholeheartedly participate and employ when needed a physician, therapist or qualified helping professional for such needs, to make my coaching experience positive and useful.

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Sign Name	Print Name	
Date		