



Programme Agreement

It is a pleasure to welcome you to this Programme. During the upcoming xxx months, you will learn ways to help achieve a healthier lifestyle.

Please read the following Programme Agreement...

This Agreement is made today between the Nutrition Counsellor of the Programme [Sarah Lantry] and the person at named at the end of this document [the Client]. The Programme in which you are about to enrol will include the following:

- Two, fifty minute consultations per month
- Dietary adjustments to help you reach health objectives and to look and feel your best
- Recipes and specific food therapies to alleviate conditions and help you achieve your health goals
- Food samples and health-care products
- Ongoing motivational and emotional support between sessions
- A monthly magazine subscription + access to a lending library, CDs and other materials
- Optional health food store or supermarket tour + cookery classes + kitchen audit
- Lifestyle adjustments for a lifetime of wellness

Scheduling

I understand that my clients have busy schedules and I take pride in not keeping them waiting or keeping them longer than planned. Each session will end fifty minutes after it was scheduled to begin. Please be on time. If the Client needs to cancel or reschedule the appointment, the Client must do so a minimum of 24 hours in advance; failure to do so will mean that the Client will forfeit that appointment and not have an opportunity to reschedule. Rescheduled meetings need to be diarised within 24 hours of original meeting date; failure to do so will mean that the Client will forfeit that appointment and not have the opportunity to reschedule.

Programme duration:

Commencement date: End date:

The programme expires if all sessions have not been completed within one month after the End date specified above.

Payments and refunds

The Client understands that the regular cost of the programme is £60 per session. Programme registration today however instigates the following pricing structure:

Programme Duration	Face to face consultation:	Email support:	Cost per session (£)	Programme cost (£)
	bi-weekly 50 minutes	Unlimited emails per week, Response within 24 hours of receipt	Per session (in advance of session)	(Total payment in advance of programme commencement)
xxx month programme	✓	✓	£ Dependent on program duration	£ Dependent on program duration

*Delete as appropriate

In the event of the Client's absence or withdrawal, for any reason whatsoever, the Client will remain full responsible for the unpaid balance of the Programme. Under no circumstances will the Counsellor refund any payments made by the Client. By signing this agreement, the Client agrees to be legally obligated to pay the full amount of the programme for the agreed duration.

Disclaimer of healthcare related services

The Counsellor encourages the Client to continue to visit and be treated by his/her healthcare professional(s), including without limitation, a physician. The Client understands that the Counsellor is not acting in the capacity of a doctor, licensed dietitian-nutritionist, psychologist or other licensed or registered professional. Accordingly, the Client understands that the Counsellor is not providing healthcare, medical or nutrition therapy services and will not diagnose, treat or cure in any manner whatsoever any disease, condition or other physical or mental ailment of the human body.

The Client has chosen to work with the Counsellor and understands that the information received should not be seen as medical or nursing advice and is not meant to take the place of the Client seeing licensed healthcare professionals.

Personal responsibility and release of healthcare related claims

The Client acknowledges that the Client takes full responsibility for the Client's life and well-being, as well as the lives and well-being of the Client's family and children (where applicable) and all decisions made during and after this Programme.

The Client expressly assumes the risks of the Programme, whether or not such risks were created or exacerbated by the Counsellor. The Client releases the Counsellor, his/her heirs, executors, administrators and assigns, its officers, directors, shareholders, employees teachers, lecturers, agents, health counsellors and staff (collectively, the Releasees) from any and all liability, damages, causes of action, allegations, suits, sums of money, claims and demands whatsoever, in law, admiralty or equity, which against the Releasees, the Client ever had, now has or will have in the future against the

Releasees, arising from the Client's past or future participation, or otherwise with respect to, the Programme, unless arising from the gross negligence of the Releasees.

Choice of Law, Arbitration and Limited Remedies

This agreement shall be construed according to English law. In the event that any provision of this Agreement is deemed unenforceable, the remaining portions of the Programme Agreement shall be severed and remain in full force. In the event a dispute arises between the parties, either arising from this Agreement or otherwise pertaining to the relationship between the parties, the parties will submit to binding arbitration before ACAS. Any judgement on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof. Such arbitration shall be conducted by a single arbitrator. The sole remedy that can be awarded to the Client in the event that an award is granted in arbitration is refund of the Programme fee. Without limiting the generality of the foregoing, no award of consequential or other damages, unless specifically set forth herein, may be granted to the Client.

In the terms of this Agreement are acceptable, please sign the acceptance below. By doing so, the Client acknowledges that:

1. He/She has received a copy of this Programme Agreement;
2. He/She has had an opportunity to discuss the contents with the Counsellor and, if desired, to have it reviewed by a lawyer; and
3. The Client understands, accepts and agrees to abide by the terms hereof.

Nutrition Counsellor: **Signature:** **Date:**

Client name:
Printed name

Signature: **Date:**