

Client contract with Be U – Achieving Health and Happiness

Terms and Conditions

By accessing and using this service, you accept and agree to be bound by the terms and provision of this agreement. In addition, when using these particular services, you shall be subject to any posted guidelines or rules applicable. Any participation in this service will constitute acceptance of this agreement. If you do not agree to abide by the above, please do not use this service.

The client shall take full responsibility for his/her health and will remain registered with a medical practitioner at all times. The client shall take full responsibility for his/her choice to seek out the practitioner, attend and/or follow any of the advisory services provided. That the client is entirely at liberty to follow in part, wholly or not at all at any time the sessions, trainings or advise sought by the client from the practitioner, imparting no blame or responsibility to the practitioner before, during or after the consultation.

Whilst all due care is taken to ensure the safety of the client and personal possessions, the client shall remain entirely responsible for his/her choice of attendance and behaviour on the premises. The client will declare all medical information pertaining to his/herself including any known allergies or allergic reactions previously experienced.

Sessions are held in a safe environment with the knowledge that all topics are open to discussion. Sessions are at an agreed time and any session that begins late due to the client cannot be extended beyond the agreed time. Sessions last between 60-90 minutes.

On occasion the practitioner may agree with the client to achieve a task within a timescale and the practitioner will ask if the client wishes to be held accountable and if so in which way.

Privacy

Sessions are private and confidential; the exceptions are should a situation arise that there is a risk of harm to yourself or others. The practitioner will endeavour to seek your permission first but, if action is required, may not do so.

In the event of the practitioner asking a question that the client does not wish to answer they can respond with 'that is the wrong question', the practitioner will respect this right to privacy.

Be U is committed to protecting your privacy. The practitioner will only use the information that we collect about you lawfully (in accordance with the Data Protection Act 1998 and GDPR 2018). Be U will not share you details with anyone including but not limited to data or marketing companies.

Consent

Be U will never collect sensitive information about you without your explicit consent. The personal information which we hold will be held securely in accordance with our internal security policy and the law. Records will be securely destroyed 7 years after conclusion of the contract. You have the right to a Subject Access Request. You have the right to request that your records be destroyed, and you be forgotten. You have the right to withdraw consent by requesting this directly with Be U.

Be U is not a crisis or emergency service, if you need to speak to someone immediately, please contact your GP, NHS 111 or the Samaritans (08457 909090).

Cancellations

If for any reason I have to cancel a session I will aim to provide you with 48 hours' notice, and you will not be charged for the session. When possible, I will try to offer you an alternative time. Likewise, I will expect you to give me 48 hours' notice if you are unable to attend. You will not be charged for appointments missed due to illness provided you give me at least 24 hours' notice. In an instance where no or insufficient notice is given on your part, I reserve the right to charge 50% of the session fee.

Please see my website for full terms and conditions <https://www.beu.org.uk>

Complaints

Should you wish to make a complaint about the service you have been offered please contact the Association of NLP and follow their procedure using the following link <https://anlp.org/anlp-complaints-procedure>.

How did you hear about us (tick box)? Internet Search, ANLP website, Life Coach Directory a friend, Recommendation Other

Are you on any medication? yes no

Are there any medical conditions pertaining to accessing therapy that Be U may need to know about yes no

I consent to Be U holding sensitive data about me for the duration of this contract and for a period of 7 years after this contract has concluded.

Print Name:

Signed:

Date:

Telephone:

Mobile phone:

Would you like email reminders about your appts? yes no

Please tick to receive emails from Be U

Email:

Address:

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Surgery Name:

Therapist Signature:

