



Teen Success Group General Information

Thank you for contacting us regarding our Teen Success Group. Our Fall 2017 group is projected to begin on November 11th, 2017 and ending February 17th, 2018.

- Our Teen Success Group is a 12-week Group Life Coaching series for adolescents in middle and high school (age 14-17).
- Classes will run for 12 scheduled Saturday mornings from 9am-10:30am in Manhattan Beach located at the following address: 1101 North Sepulveda Blvd. Suite 201, Manhattan Beach, CA 90266.
- Start dates are subject to change based on our selective interviewing process and the formation of a well-matched group of participants.
- Skills taught in each class build upon the last - it is important to attend all classes!
- If your family has planned activities that require you to miss more than 2 classes in a 14-week session, you will be asked to participate at a later session.
- The Teen Success Group includes a monthly parent-only group to update and discuss what participants are learning in the group. Thus, it is imperative that at least one parent be willing to attend the parent group (it need not be the same parent every parent group).
- Cost for 12-weeks of class is \$1,275.00 (\$85/per group). Payment options are available.
- First payments must be processed prior to November 11th, 2017
- We do not bill insurance and we do not provide superbills. We do accept credit cards, checks and cash as payment methods.
- Groups are not formed on the basis of a particular diagnoses, but instead determined by general areas of improvement amongst adolescents 14-17 years old.

Group Dates and Times

Standard Group Times 9am-10:30am

Parent Groups – 11am-12pm

November 2017

11/11/17- 9am-10:30am

11/18/17- 9am-10:30am + Parent Group 11am-12pm

December 2017

12/2/17-9am-10:30am

12/9/17-9am-10:30am

12/16/17- 9am-10:30am + Parent Group 11am-12pm

January 2018

1/6/18- 9am-10:30am

1/13/18- 9am-10:30am

1/20/18- 9am-10:30am + Parent Group 11am-12pm

1/27/18- 9am-10:30am

February 2018

2/3/18 - 9am-10:30am

2/10/17- 9am-10:30am

2/17/17- 9am-10:30am + Parent Group 11am-12pm

Contact Information

Avi Satz, CPC – (310) 945-7758 – avi@corecoachinggroups.com

Sophia Galano, ASW (310) 467-1168 – sophia@corecoachinggroups.com

Group Location

Manhattan Professional Building
1101 North Sepulveda Blvd. Suite 201
Manhattan Beach, CA 90266



Teen Success Group – Participant Agreement

INSTRUCTIONS: *Please review, sign and return to as soon as possible via email – avi@corecoachinggroups.com*

This agreement is entered into by: _____ (“Group Participant”) and AVINASH SATZ/SOPHIA GALANO/CORE COACHING GROUPS and pertains to group life coaching services for adolescents 14-17 years old.

Core Coaching Group Details:

Teen Success Group begins November 11th, 2017 and ends February 17, 2018. This is a 12-week coaching series that meets on scheduled Saturday mornings from 9am-10:30am in Manhattan Beach, California. A separate parent group will be held once a month from 11am-12pm.

Location: 1101 North Sepulveda Blvd, Suite 201, Manhattan Beach, CA 90266

Group Coaching:

Group coaching is a joint venture between the facilitators and all group members. You are encouraged to participate in the process of developing and monitoring goals and outcomes. You agree to support the group, honoring and valuing each participant.

Coaching is not therapy, though therapy may involve coaching at times. If you need therapy after beginning the coaching group, you will be referred to another provider. You may continue coaching while receiving therapy with another provider, but you may be asked to sign a release authorizing an exchange of information between AVINASH SATZ/SOPHIA GALANO/CORE COACHING GROUPS and the other provider. This will ensure that no conflicts arise.

Knowing the Risks of Group Coaching

There can be discomfort involved in participating in group coaching. You may experience feelings of anger, fear, anxiety, sadness, frustration, loneliness, helplessness, or other unpleasant feelings. If these distressful emotions arise during the Teen Success Group, we ask that you inform the group facilitators.

If you believe that the group is not the most appropriate setting to heal and grow, you will communicate this with the facilitators.

Confidentiality

It is important to feel comfortable in speaking freely about experiences throughout the group. Sometimes you might want to discuss topics you do not wish your parents or guardians to know about. You have the expectation of privacy in group sessions. As a general rule, group facilitators do not talk to your parents about what you discuss in group without your permission.

However, there are some exceptions to this rule. In some situations, in accordance with professional ethics and state laws, facilitators may disclose information without permission. Some of the circumstances where disclosure is required:

- If you, another minor, a dependent person, or an elder adult is being abused
- If you are in danger of hurting yourself, someone else, or another person's property
- When a family member communicates to your facilitator that you present a danger to others

If your behaviors could cause serious harm to yourself or others, facilitators will use their professional judgment to decide whether a parent or guardian should be informed. In these situations, facilitators will communicate their concerns and discuss the best way to include your family in receiving support.

Group member's agreement for confidentiality

All members of the group will be asked to agree to a high level of confidentiality in the group sessions. This means that each participant agrees not to share any other group member's identifying and personal information. It is appropriate to share personal reactions and feelings, but **please do not share other people's stories with anyone outside of the group.**

The Client understands and agrees to each of the following provisions:

- A. I hereby agree AVINASH SATZ and SOPHIA GALANO as my "Group Coach/Facilitators" for the purpose of advising and counseling with respect to the proper format for Life Coaching and Personal Development. They may also assist in structuring, identifying and achieving goals as he/she has experience in such matters and agrees to render such services.
- B. I understand and agree that AVINASH SATZ and SOPHIA GALANO are not providing psychotherapy, psychoanalysis, counseling and behavioral therapy.
- C. I further understand and agree that as a specialized form of support, life coaching is not the same as professional or licensed therapy; and that I am always free to reject any advice, suggestions or requests made by the coach at any time. AVINASH SATZ and SOPHIA GALANO are authorized and encouraged to be direct and unconditionally supportive.
- D. I further understand and agree that I am to inform AVINASH SATZ and SOPHIA GALANO whenever I am under the care of any healer or licensed physician, therapist or psychiatrist; and/or any time I am taking any prescriptions or drugs.

E. I understand that as a group member it is my responsibility to participate in group sessions and remain in the group room unless instructed otherwise by the facilitators. I will not leave the premises without my parent or guardian.

Financial Policy:

All fees are payable at the initial meeting in order to guarantee my place and commitment to the group. Coaching is not considered a medical necessity and is therefore not covered by insurance. We do not bill insurance companies nor do we generate superbills. Cash, check, cashier's check, and most credit cards are accepted. There is a \$20 fee for returned checks.

No-show/Cancelation Policy

I understand that enrolling in the Teen Success Group, I plan on attending each group session in this 12-week series. Although illness, unexpected events, or vacations may occasionally interrupt my group attendance, consistent attendance plays a large role in helping all group members. Group sessions may not be rescheduled, and fees are non-refundable, unless AVINASH SATZ/SOPHIA GALANO/CORE COACHING GROUPS cancels or reschedules a group session. It is understood that I may not be able to make all of the group sessions, and it is requested that I let the group facilitators know when I will be unable to attend.

Contractual Agreement:

I have read and understood this contract, and I agree to its terms. I acknowledge that AVINASH SATZ/SOPHIA GALANO/CORE COACHING GROUPS can make no guarantee or warranty as to the results of these services. I am consenting only to those services that AVINASH SATZ/SOPHIA GALANO/CORE COACHING GROUPS are qualified to provide within the scope of their license, certification, and training.

AS A GROUP PARTICIPANT, I UNDERSTAND AND AGREE THAT I AM FULLY RESPONSIBLE FOR MY WELL-BEING DURING THE TEEN SUCCESS GROUP. I AM AWARE THAT I CAN CHOOSE TO DISCONTINUE COACHING AT ANY TIME. I RECOGNIZE THAT COACHING IS NOT PSYCHOTHERAPY AND THAT PROFESSIONAL REFERRALS WILL BE GIVEN IF NEEDED.

Group Participant Signature:

_____ Date: _____

Group Participant Printed Name:

Parent/Guardian Signature:

_____ Date: _____

Parent/Guardian Printed Name:



Teen Success Group – Group Participant Information

INSTRUCTIONS: *Please review, sign and return to as soon as possible via email – avi@corecoachinggroups.com*

Group Participant Information

Full name:

Date of birth:

Client phone number:

Email address:

Medications prescribed:

Mental health diagnosis:

Parent/Guardian Contact Information

Parent #1

Name:

Phone number:

Address:

Email:

Relationship to client:

Parent #2

Name:

Phone number:

Address:

Email:

Relationship to client:



Payment Schedule/Credit Card Authorization

Please initial which payment option you would like and complete the Payment Schedule/Credit Card Authorization Form. Please print, sign and email to avi@corecoachinggroups.com.

Payment Options

Pay in full (\$75.00 Discount)

Cost: \$1,200.00

Initials _____

3 Monthly Payments

Cost: \$425.00/per mo. Beginning November 2017 subsequent monthly payments will processed on the 15th of December and January 2018

Initials _____

Credit Card Authorization

I authorize Avinash Satz/Core Coaching Groups to charge the amount selected above to the credit card provided herein.

I understand that if I chose a payment option that requires scheduled charges to my credit card, those charges will be processed on date indicated. A receipt for each payment will be provided to you and the charge will appear on your credit card statement. You are in agreement that no prior-notification will be provided unless there is a change in the processing date.

I understand that my payment secures my son/daughter's enrollment in a 12-week life coaching group series. Group sessions may not be rescheduled, and fees are non-refundable, unless Avinash Satz/Core Coaching Groups cancels or reschedules a group session.

Card Details

Visa MasterCard Discover American Express

Cardholder Name _____

Account/CC Number _____

Expiration Date ____ / ____

CVV _____

Zip Code _____

Cardholder Initials _____

Billing Information

Billing Address _____

City, State, Zip _____ Email _____

SIGNATURE _____ DATE _____
(Cardholder's Signature)

Son/Daughter's Name: _____

Cardholder Initials _____