

Walk/Talk Session Consent Form

I, _____, have requested a walk/talk Session (i.e. a session that takes place outside of an office while walking with Shannon Hecker (through Oh Heck Services) as a process in my wellness. I understand that I may request that my session take place within an office at any point.

By signing this form, I further agree to the following:

- I agree that I am responsible for setting the walking pace of the walk/talk session.
- I understand that this is not exercise or workout training, and that while movement may be a benefit to me physically, the focus is not about exercise.
- I agree to communicate with Shannon if I am uncomfortable physically or emotionally while participating in a walk/talk session.
- I take full responsibility for my medical and physical well-being and will not hold Oh Heck Services legally or financially responsible for any medical conditions and/or accidents that may arise out of walk/talk therapy.
- I agree to seek a doctor's approval before beginning walk/talk therapy if appropriate.
- If I have any medical conditions that would be detrimental to a walk and talk session, I agree to disclose this and understand Shannon may not be able to offer this as an option.
- I understand that if Shannon and I come into contact with a person that I know, I have the right to disclose or not to disclose that I am in a walk and talk session. I understand that Shannon will follow my lead should we come into contact with a person I know and Shannon will make every effort to preserve confidentiality and privacy while conducting my walk/talk session.
- I understand that if Shannon should come into contact with a person he/she knows, Shannon will not acknowledge me as a client or the walk/talk session as counselling to preserve confidentiality.