## Living in Technicolour Coaching Program Program Participation Agreement

This agreement is effective as of the date mentioned below by and between Jasjit Rai and Joi Works Consulting (hereinafter known as "Company") and you (hereinafter known as the "Client"). Client desires to participate in the Program, which may include, but is not limited to training calls, educational events, private coaching calls and more. If Company approves your Application and accepts your offer to participate in the Living in Technicolour Coaching Program, then this Agreement automatically becomes a binding contract between you and the Company and applies to your participation in the Program.

This is an agreement for the provision of Professional Coaching services. Client agrees to comply with the payment option they signed up for and authorizes Company to charge the amount to the provided credit card(s). Client further agrees to be bound by this program commitment and agrees to abide by the Program as described in the Living in Technicolour Program Participation Agreement. By completing and signing this Application and submitting your credit card payment, Client hereby acknowledges that Client has read, understands, and agrees to be bound by the terms and conditions stated herein.

**Payment.** By completing the Application and signing below Client authorizes Company to charge your credit card or cash your check as payment for the Program, if the Company approves your Application and accepts you into the Program. Furthermore, you understand and agree that by completing and signing this Coaching Agreement that you are committing to a full three (3) or six (6) month period (depending on your chosen program) in the Living in Technicolour Coaching Program whether you actually attend or complete the Program, and regardless whether you have selected a lump sum or monthly payment plan. By signing this Agreement, you further understand and agree that, if for any reason, you choose to remove or cancel yourself out of the program prior to the end of the three (3) or six (6) month program period, you are obligated to pay or continue paying any outstanding balance(s) for the entire three (3) or six (6) month period from the date printed on the signed enrollment form for the selected investment option. To further clarify, no refunds will be issued and all scheduled payments must be paid on a timely basis whether you complete the Program or not.

**Cooperation**: Company is committed to providing all Program Participants with a positive Program experience. By signing below, you agree that Company may, at its sole discretion, terminate this agreement and limit, suspend or remove any participant from continuing in the private coaching at any time without a refund if the Client is disrupting the program or becomes difficult to work with or ceases to follow any of the coaching program guidelines. Furthermore, by signing below you agree that if you miss any scheduled follow-up coaching calls you lose that call and cannot reschedule it. Client understands that any/all scheduled coaching calls, planned events and other benefits expire at the end of the Commitment Period and will not be carried over. It is important to note that your benefits MUST be used during the Commitment Period.



Confidentiality: Company respects your privacy and must insist that you respect the privacy of the Company. By signing below you agree to not violate the publicity or privacy rights of the Company. We respect your confidential and proprietary information, ideas, plans and trade secrets and must insist that you respect the same right of the Company. By signing below, you agree (1) not to infringe the Company's copyright, patent, trademark, trade secret or other intellectual property rights, (2) that any Confidential Information shared by any representative of the Company is confidential and proprietary, and belongs solely and exclusively to the Company, (3) you agree not to disclose such information to any other person or use it in any manner other than in discussion with representatives of the Company. By signing below, you further agree that (4) all materials and information provided to you by the Company are its confidential and proprietary intellectual property, belong solely and exclusively to the Company, and may only be used by you as authorized by the Company, and (5) the reproduction, distribution and sale of these materials by anyone but the Company is strictly prohibited. Further, by signing below, you agree that, if you violate, or display any likelihood of violating, any of your agreements contained in this paragraph, the Company will be entitled to injunctive relief to prohibit any such violations to protect against harm of such violations.

**Disclaimer:** Company has made every effort to accurately represent this Program and its potential. Results can and do vary; therefore the Company makes no quarantees. The testimonials and examples used are not intended to represent or quarantee that anyone will achieve the same or similar results. Each individual's success depends on many factors, including but not limited to his or her background, dedication, desire and motivation. By signing below you also acknowledge that you have represented to the Company that payment of your private intensive fees will not place significant financial burden on you or your family. The Company shall not be held liable or responsible for any loss or damage caused, or alleged to be caused, directly or indirectly, by the information and consultation provided through this Program. Program instructors are not qualified to provide legal, tax, accounting or financial advice, and the information provided to you by the Program instructors is not intended as such. Refer all legal, tax, accounting, and financially related inquiries to appropriately qualified professionals. Furthermore, Jasjit Rai and Joi Works Consulting are not qualified to render psychiatric diagnoses or treatment. If you are struggling with depression, substance abuse, or any other addiction/behavior that may affect your safety or the safety of others, consult a qualified professional for treatment.

Client Name:	Date:	
Client Signature:		