

Jillian Sokoloff M.A.
334 Washington Drive
Cottage Grove, Oregon 97424

Life Coach

Payment Agreement

In consideration of professional services rendered, I the undersigned, do hereby agree to the following payment arrangement with Jillian Sokoloff M.A.,

I am responsible for a fee of \$100.00 per session. Electronic forms of payment are accepted as well as checks. Payments are due at the beginning of each session.

I understand that I am solely responsible for the agreed upon fee.

Signature

Name: _____

Address: _____