



Ho'omana Life Coaching, LLC

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## Teen Group Participation Registration Form

Participant Name: \_\_\_\_\_

Name of Parent/Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

☐ I'd like more information about Ho'omana Life Coaching LLC.

☐ I'd like more information about individual/family coaching with Ho'omana Life Coaching LLC

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Forms can be emailed to [info@hoomanalifecoaching.com](mailto:info@hoomanalifecoaching.com) or sent with participant.



Ho'omana Life Coaching, LLC

## Teen Group Participation Consent Form

I, \_\_\_\_\_, parent of minor child(ren)  
\_\_\_\_\_, hereby  
consent for my child(ren) to participate in the Ho'omana Life Coaching LLC Teen Groups by Kristina Danley.

**Description of Services:** The purpose of the program is to offer education and support to help teens develop strong self-concepts. I understand that this workshop does not provide counseling but is an educational and support program designed to teach skills, facilitate self-awareness and confidence, promote new behaviors, and demonstrate how to effectively deal with some of the issues life presents. The group facilitators have found that when working in groups, children gain support from others who are experiencing similar situations or who have adjusted well after experiencing a similar situation in the past. I am also aware that the despite the fact that the group facilitators may be professional counselors, this group will not provide group counseling.

**Confidentiality:** I understand that in order to encourage children to participate actively, parents and outside observers will not be allowed to attend. I understand that participation in the group is completely voluntary and confidentiality is addressed and respected. I understand the exception to this is the group facilitator's legal and ethical responsibility to take appropriate action in the case of an individual intending to do harm to self or others, if abuse or neglect is suspected, or if illegal activity is reported.

I understand that the program may be described in written publications but that no information will be provided that could identify any individual participants in the program. I give my consent for Ho'omana Life Coaching LLC and/or Kristina Danley to use artwork, images or quotations made by my child in support group brochures, literature, or other public relations activities. My child will not be identified by his or her real name.

**I have signed below that I have read, understand, and agree to the above:**

_____ Parent's Signature	_____ Parent's Name (Print)	_____ Date
_____ Participant's Signature	_____ Participant's Name (Print)	_____ Date

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## Waiver of Liability Form

I, \_\_\_\_\_, (parent/legal guardian) am fully aware that participation in Ho'omana Life Coaching LLC activities and programs may result in risk of personal injury or harm to a minor child. I hereby agree to release and hold harmless Ho'omana Life Coaching LLC, its officers, employees, volunteers, and committees from and against any and all liability, loss, damages, claims or actions (including attorney's fees and court costs) for bodily injury and/or property damage, to the extent permissible by law.

I understand that I am accepting financial responsibility for any equipment damages resulting from negligent, reckless, or wrongful use by participant.

This indemnification and hold harmless agreement shall include indemnity against all costs (including, without limitation, attorney's fees and court costs), expenses and liabilities incurred in connection with any such claim or proceeding brought thereon and in defense thereof, or other claims brought by third parties (including other participating patrons) if related to participant's actions.

\_\_\_\_\_  
**Parent's Name (Print)**

\_\_\_\_\_  
**Parent's Signature**

\_\_\_\_\_  
**Participant's Name (Print)**

\_\_\_\_\_  
**Date**

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