HEALTH, WELLNESS & LIFE COACH SUPPLEMENTAL

For health and wellness coaches, life coaches, nutrition-focused coaches, and coaching practices. Business and executive coaches use CWCO-SUP-COACH; licensed dietitians, counselors, and therapists use their own professional forms. Complete with ACORD 125. Attach the client agreement and scope-of-practice statement, coaching credentials, program descriptions and marketing, a list of any products sold or recommended, and five years of loss runs.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS

BUSINESS ADDRESS	CITY / STATE / ZIP	WEBSITE

Entity type:
☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation ☐ Nonprofit

PRIMARY CONTACT / TITLE	PHONE	EMAIL

COACHING CREDENTIALS (NBC-HWC, ICF, OTHER)	OTHER LICENSES (RD, LPC, RN, CPT, ETC.)

2 OPERATIONS

DESCRIBE THE COACHING FOCUS, THE CLIENTS SERVED, AND HOW COACHING IS DELIVERED

PROGRAM OR SERVICE	% OF REVENUE

Examples: one-on-one health coaching; life or transition coaching; weight or metabolic coaching; group programs or challenges; corporate wellness; online courses or memberships; retreats.

Delivery (check all that apply):
☐ In person ☐ Video / phone ☐ App or text messaging ☐ Group calls ☐ Corporate or employer programs
☐ Through a medical practice or telehealth company

Size:
_____ Coaches (incl. owner) _____ Contract coaches _____ Active clients _____ Group participants per year _____ States where clients live

3 EXPOSURE & RISK QUESTIONS — NUTRITION, SUPPLEMENTS & SCOPE

Florida cited a paid holistic health coach for practicing dietetics without a license, and a federal appeals court upheld the law in 2022. The NBHWC scope excludes meal plans, supplement advice, and diagnosis.

3-1 Do coaches give clients individual diet advice or meal plans? ☐ Yes ☐ No
IF YES, EXPLAIN

3-2 If yes to 3-1, is that advice given only by a licensed dietitian or nutritionist? ☐ Yes ☐ No
IF NO, EXPLAIN

3-3 Are clients coached in states that license dietetics or nutrition counseling? ☐ Yes ☐ No
IF YES, EXPLAIN

3-4 Do coaches recommend specific supplements or doses? ☐ Yes ☐ No
IF YES, EXPLAIN

This supplemental is an intake document. It does not replace any carrier application and affords no coverage.

3-5 Does the applicant sell supplements, shakes, or wellness products? ☐ Yes ☐ No
IF YES, EXPLAIN

3-6 If yes to 3-5, are the products sold through a multilevel or affiliate program? ☐ Yes ☐ No
IF YES, EXPLAIN

3-7 Do coaches interpret lab results or medical tests? ☐ Yes ☐ No
IF YES, EXPLAIN

3-8 Do coaches write exercise programs or lead physical training? ☐ Yes ☐ No
IF YES, EXPLAIN

3-9 Does every client sign a statement that coaching is not medical, nutrition, or mental health treatment? ☐ Yes ☐ No
IF NO, EXPLAIN

3-10 Does the applicant work with clients on GLP-1 or other weight-loss medications? ☐ Yes ☐ No
IF YES, EXPLAIN

4 EXPOSURE & RISK QUESTIONS — CLIENT HEALTH RISK, PROGRAMS & MARKETING

Coaching policies often exclude therapy and treatment, so clients in crisis or with eating disorders are the costliest scope problem. Results promises in marketing turn refund disputes into claims.

4-1 Are clients screened at intake for eating disorders, pregnancy, or serious medical conditions? ☐ Yes ☐ No
IF NO, EXPLAIN

4-2 Is there a written referral protocol for clients who disclose self-harm or a mental health crisis? ☐ Yes ☐ No
IF NO, EXPLAIN

4-3 Do coaches work with clients on trauma, grief, or relationship issues? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Are minors coached? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Do programs include fasting, detoxes, or very-low-calorie diets? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Do programs include group challenges with prizes for weight loss? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Does marketing promise specific weight loss, health results, or income? ☐ Yes ☐ No
IF YES, EXPLAIN

4-8 Are client testimonials used in marketing? ☐ Yes ☐ No
IF YES, EXPLAIN

4-9 Does the applicant sell a coach certification or training program to others? ☐ Yes ☐ No
IF YES, EXPLAIN

4-10 Are refunds offered under a written policy? ☐ Yes ☐ No
IF NO, EXPLAIN

5 PAYROLL, SALES & REVENUE

ANNUAL GROSS REVENUE ($)	PRODUCT / AFFILIATE REVENUE ($)	TOTAL ANNUAL PAYROLL ($)	PAID TO CONTRACT COACHES ($)

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6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

PROFESSIONAL / E&O CARRIER	LIMITS PER CLAIM / AGGREGATE	RETROACTIVE DATE

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED ($)	OPEN / CLOSED

6-1 Has a state board or attorney general contacted the applicant about unlicensed practice? ☐ Yes ☐ No
IF YES, EXPLAIN

6-2 Has a client demanded a refund or threatened suit over results? ☐ Yes ☐ No
IF YES, EXPLAIN

6-3 Has any carrier declined, cancelled, or non-renewed coverage for this operation in the past 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

6-4 Is the applicant aware of any incident or circumstance that could give rise to a claim? ☐ Yes ☐ No
IF YES, EXPLAIN

7 RISK MANAGEMENT & SAFETY

7-1 Are coaching notes kept for every session? ☐ Yes ☐ No
IF NO, EXPLAIN

7-2 Is marketing reviewed for health and income claims before it is published? ☐ Yes ☐ No
IF NO, EXPLAIN

7-3 Do contract coaches carry their own liability insurance? ☐ Yes ☐ No
IF NO, EXPLAIN

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, may be committing a fraudulent insurance act, which is a crime and may subject such person to criminal and civil penalties. State-specific fraud warnings appear on the insurer's application.

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE

PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE