



**WALK AND TALKS, LLC  
PRACTITIONER CERTIFICATION APPLICATION**

*We are excited for your interest in joining our professional team of Certified Walk and Talks Psychotherapists and Life Coaches.*

Are you a Licensed Psychotherapist/Counselor with a state license number? Yes / No

AND/OR

Are you a Certified Life Coach with at least 5 years of experience? Yes / No

Is your Liability Insurance up to date and renewed annually? Yes / No

Applicant Name: \_\_\_\_\_

Educational Background: \_\_\_\_\_

\_\_\_\_\_

State: \_\_\_\_\_ License Number: \_\_\_\_\_

Liability Insurance for Independent Practice : \_\_\_\_\_

How many years have you been in practice? \_\_\_\_\_

Have you already conducted walking sessions? \_\_\_\_\_ Yes / No \_\_\_\_\_

If yes, please tell us about your experiences: \_\_\_\_\_

\_\_\_\_\_

What interests you in practicing walking psychotherapy sessions?

\_\_\_\_\_

Please describe how you will handle the following situations:

- A client wants outdoor sessions but has physical limitations.:
- A client is concerned about inclement weather.:
- A client becomes short of breath during a session.:
- A client wants to bring their baby in a stroller during the session:
- A client wants their session to be an intense, calorie burning workout.:
- A client begins crying uncontrollably during the walk.:
- A client sees someone they know during your walking session.:
- A client wants to have lunch with you after a session.:
- A client wants to meet late in the evening.:
- A client wants to bring their dog to the session.:
- A client wants you to meet at their home or office rather than a park.:

*To complete the application process, return your application along with copies of your state license and professional liability insurance by email to: [info@walkandtalks.com](mailto:info@walkandtalks.com). The non-refundable application fee is \$49.00 payable securely through PayPal on the website. All newly certified practitioners will receive the first three months of a professional "Walk and Talks Certified" listing on our website for free.*

*By signing this application I hereby confirm that licensure information above is true and correct to the best of my knowledge and promise to abide by the professional ethics set forth by Walk and Talks, LLC and that of my professional licensing board.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_