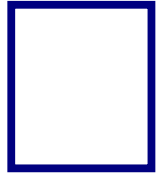




# CONSULTATION QUESTIONNAIRE

## TWEED COAST PERSONAL TRAINERS



CODE

How did you hear about us? \_\_\_\_\_ Referral Name: \_\_\_\_\_

### PERSONAL INFORMATION

Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
M  F   
Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

### MEDICAL CHECK

Medications: \_\_\_\_\_  
Tick if YES  
 Hepatitis  Epilepsy  Asthma  Diabetes  Heart  Blood P  Hernia  
Injuries: \_\_\_\_\_  
Recent surgery: \_\_\_\_\_  
Pregnant Y  N

### CURRENT LIFESTYLE DETAILS

Date Of Birth: \_\_\_\_\_  
Occupation \_\_\_\_\_  
Nutrition: meals a day  rating 1-5  need help   
Water intake: glasses  rating 1-5  need help

### GOALS/ RESULT AIMS

Weight loss Aim: \_\_\_\_\_ Dress Size: \_\_\_\_\_  
 Tone Up  
 Fitness level Aim: \_\_\_\_\_  
 Sport Specific Level: \_\_\_\_\_ Race: \_\_\_\_\_ Fit Test: \_\_\_\_\_  
 General Health  
Rehabilitation Specifics: \_\_\_\_\_  
Time period: 6 wks  12wks  6mths  12mths  other   
Date aim to achieve by: / /

### FITNESS INFORMATION

#### CURRENT TRAINING

Team sport: \_\_\_\_\_  
 Walk  
 Run/ Jog  
 Cycle  
 Swim  
 Dance  
 Gym classes  
 Weight training  
 Boxing/ Martial arts  
 Pilates/ Yoga  
Other \_\_\_\_\_  
Minutes per wk:

#### NEW TRAINING

Interested in trying T or hate doing X  
 Team sport \_\_\_\_\_  
 Walk  
 Run/ Jog  
 Cycle  
 Swim  
 Dance  
 Gym classes  
Specific:  
 Weight training  
 Boxing/ Martial Arts  
 Outdoor group  
 Deep water run/ aqua  
 Pilates/ Yoga  
 Other \_\_\_\_\_

## PERSONAL TRAINING INFORMATION

### WHY A PT

Motivation

- Information, advice
  - Technical help
  - Greater results
  - To challenge
  - Time effective
  - Set appointment
  - Health Conscience
  - General help
  - Recommended medically
  - Referred by a friend
  - Impressed by others achievements
  - To show capabilities
  - Increase intensity levels
  - Other
- \_\_\_\_\_

### NEED HELP WITH

*NUTRITION*

- Nutrition
- Goal Setting

*GENERAL*

- Motivation

*WEIGHT TRAINING*

- Gym program
- Technical session
- Rehabilitation exercises

*CARDIO TRAINING*

- PT sessions
- Weekly Program
- Monitoring
- Fitness Testing
- Classes/ group training
- Variety / keeping it interesting
- Other \_\_\_\_\_

### COMMITMENT

*What you're prepared to do to get results:*

PERSONAL TRAINING

- Weekly
- Twice weekly
- Other \_\_\_\_\_

For a minimum of  weeks.

CLASSES

- Outdoor group \_\_\_\_\_
- Gym \_\_\_\_\_

SELF

- Weights
- Days training a week \_\_\_\_\_

TOTAL TIME PER WEEK

WHY A PT QUOTE:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TRAINER NOTES:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### *Programs Prescribed*

- Gym Membership
  - Nutritional Analysis
  - Body Composition Assessment and goal setting.
  - Fitness Assessment and Testing
  - PT session weekly
  - PT twice weekly
  - PT three times a week
- For  Weeks
- Doctor Certificate required

### *Packages Available*

- 12 Week Success Program
- 12 week Challenge
- Silver 6mth Membership
- Gold 12mth Membership
- Outdoor group Pack
- Baby On Board Program
- Monthly Motivator

### *Extras*

- Heart Rate Monitor Hire  Days
- Calorie Counter Hire  Days
- Pedometer Hire  Days
- Boxing Gloves, Size
- Training Pack (Towel, Shirt, Water Bottle) Shirt Size