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GOALS QUESTIONNAIRE

This questionnaire is designed to help identify specific wellness goals that can help pinpoint the most effective and efficient program for you.

Areas I want to improve:						
		Aerobic endurance		Specific sport ability:		
		Muscular endurance		Injury rehabilitation:		
		Flexibility		Back problem:		
		Reflexes		Physique		
		Speed		Sleep better: (more/less?)		
		Power		Specific job ability:		
		Improve balance & coordination		Improve self-esteem		
		Improve eating habits		Body weight (loss/gain?)		
		Improve posture		Reduce blood pressure		
		Lower % body fat		Firm and tone		
		Pain elimination/management		Other (specify):		
	In	nproving my fitness and wellness levels is	ex		<u>)</u>	
	Have you participated in a fitness/wellness program before? If yes, please describe. I was most successful in my fitness or weight loss programs when I am committing myself to my fitness/wellness program because otherwise I would have to live with the following unbearable consequences (ex. low self-esteem, limited success, dependency upon others, etc.)					
	What I would most like to achieve from my new fitness program is					
	Equipment available:					
	How much time available For training sessions: For workouts in-between (on my own):					
	Pá	articipant:		Date:		
	0	1.0			09/20/09	

GoalsQuestionnaire 08/20/08