

HEALTH AND FITNESS GOALS WORKSHEET

How can I help you? Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Lose Body Fat | <input type="checkbox"/> Develop Muscle Tone |
| <input type="checkbox"/> Rehabilitate an injury | <input type="checkbox"/> Start an Exercise Program |
| <input type="checkbox"/> Design a more advanced strength program | <input type="checkbox"/> Sports Specific Training |
| <input type="checkbox"/> Increase Muscle Mass | <input type="checkbox"/> Feel better and have more energy |
| <input type="checkbox"/> Motivate me to eat well | <input type="checkbox"/> Motivate me to work out consistently |
| <input type="checkbox"/> Detox my body from sugars, toxins and garbage | |
| <input type="checkbox"/> Other _____ | |

1. Please list in order or priority, the health and fitness goals you would like to achieve in 3-12 months.

- a. _____
- b. _____
- c. _____

2. How will you feel if you meet those goals? Be specific:

3. Where do you rate your health and fitness in your life? 1-10 (10 high): _____

4. Rate your level of commitment to achieve your goals? 1-10: _____

5. Do you have a community or person who can help you achieve your goals? Yes No

6. What do you think is the most important thing I can do to help you achieve your goals?

7. Describe what you feel are the obstacles or your potential actions, behaviors, or activities that could impede your progress toward achieve your goals?

(i.e. Consistency, addictions, unhealthy relationship, upcoming vacation or work trip, health, etc.)

8. List 3 methods you feel could help you overcome these obstacles

- a. _____
- b. _____
- c. _____