



CLIENT LIFESTYLE PROFILE

1. Describe your fitness/work-outs/physical activity/sports played & enjoyed over your lifetime:
2. What does Your Best Healthiest Self *Feel* and Look like?
3. Describe a typical week/work Day of meals and snacks:
4. Describe a typical Weekend of meals and snacks (including alcohol)
5. What is your favorite food and beverage indulgence?
6. How many, if any, do you consume on a Weekly basis - Starbucks/coffee specialty drinks Soda
Wine/Beer/Cocktails
7. How often do you dine out (including breakfast, lunch & dinner) /week?
8. How much water do you drink daily?
9. How many hours of sleep do you get on average per night?
10. What causes you the most stress in your life?
11. Describe how you felt on your last vacation?
12. What is the one thing you want to achieve by working out regularly with a Personal Trainer?
13. What body part to you most want to modify through physical exercise?
14. What inspired you to take the step to work with a Personal Trainer to help reach your goals?
15. What happens if you don't make the changes to achieve your goals or achieve a sustainable healthy lifestyle?
16. What fitness activity or sport have you always wanted to try or learn more about?
17. What fitness, sporting or physically active fundraising event (i.e. Geist 5K, Hilly Hundred, The Mini, etc.) have you always wanted to participate in or that is on your "Bucket List"?
18. Do you have a special cause or charity that is important to you or that you currently support/volunteer?
19. What is your favorite quote or Mantra?
20. What or Who are YOU Inspired By?

