



Coaching Client Intake Form

Name:

Age:

Birthday:

Email:

Phone:

Address:

Occupation:

How Did You Hear About Us?

Starting Statistics

Height:

Weight:

Waist Measurement:

Body Fat % (If Known)

Past, Present, and Future

1. What has brought you in today? What would you like to change?

2. What are your main motivations? (Why)?

3. What have you tried in the past? Did It Work?

4. What have been your main obstacles? Do they still persist?



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5. Out of the following statements, what most represents how you feel.
- a. I am thinking about trying to change.
 - b. I am ready to take small steps in order to change.
 - c. I am ready to take dramatic action to accomplish change?

Your Health

(Refer to the PAR-Q and Detailed Health History Form)

- 1. Do you have adequate health support? (Insurance?, a doctor?)
- 2. When was your last doctor's appointment?
- 3. Are you currently taking any medications?

- 4. Do you have any "specific" health concerns at this time?

Exercise

- 1. Describe your current exercise routine. Cardio? Resistance Training?
 - a. Type of exercises?
 - b. Days per week?
 - c. Hours per day?



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Nutrition

1. Tell me about your current eating habits.

- a. Do you know how to cook?
- b. How many meals do you eat per day?
- c. How many calories do you consume per day?
- d. Do you log (write down) your food?
- e. Are there any specific “diets” or meal plans you are trying?
- f. Would you be willing to modify your eating habits to reach your goals?
- g. Are you currently taking any supplements?(If so please list)
- h. Would you be willing to add supplements to your meal plan if it assisted in reaching your goals?
- i. Do you have any food allergies?



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Stress

1. On a scale of 1 (low) - 10 (very high) how stressed would you say you are

today? 1 2 3 4 5 6 7 8 9 10

2. On that same scale, how stressed are you on an average day?

1 2 3 4 5 6 7 8 9 10

3. How many hours of sleep do you get per night on average?

4. Do you have any regular strategy to deal with stress? (meditation? yoga? etc.)

5. Would you be willing to add in stress reduction techniques if it helped you reach your goals?

What kind of change would you like to see in:

6 weeks?

3 months?

6 months?

12 months?

Have you ever worked with a fitness professional?

Did you see results?



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Do you have any questions or concerns that you would like us to answer or address?

Remember, motivation drives action. Don't forget to ask yourself "why?".