

# QUESTIONS

So we may assist you better

NAME: \_\_\_\_\_



- What are your #1 and #2 goals for the season? \_\_\_\_\_  
\_\_\_\_\_
- What number of hours can you devote to train each week?  
 4-6     6-10     9-13     11-15     15+     OTHER
- What was your longest training week ever (in hours) and for what? \_\_\_\_\_  
\_\_\_\_\_
- How much (hours) do you train/workout now, weekly? \_\_\_\_\_
- List any sport, how long you were involved, and at what level (ie recreational, high school, college, national...) \_\_\_\_\_  
\_\_\_\_\_
- Please list any current medical conditions, recurring sports injuries, or other health issues that may restrict your training (high blood pressure, asthma, pregnancy, diabetics, allergies...) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- What are your nutritional habits?  
 Health nut     Good or better     Mediocre     Terrible-give me fast food
- My knowledge of nutrition is:  
 Proficient     Decent     Use Improvement
- What are your strongest (1) to weakest areas (4) - number all 4.  
    \_\_\_Swim    \_\_\_Bike    \_\_\_Run    \_\_\_Strength/Flexibility
- Do you have a race specific element that you would like to improve on during this program? (run technique, leg strength on bike, swim technique, endurance...) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Brief multisport competitive history (if any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



May we include your name, phone number and email address on a Club contact list? If yes, please write the information as you would like it listed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Be sure to visit our website at*

***www.therocktriclub.com***  
*then tab Tri-101!*