



## Fitness Goals

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

**Please check any goals that apply**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> General Fitness           | <input type="checkbox"/> Weight Loss           | <input type="checkbox"/> Improve Cardiovascular Fitness |
| <input type="checkbox"/> Increase Muscle Strength  | <input type="checkbox"/> Decrease Body Fat     | <input type="checkbox"/> Smoking Cessation              |
| <input type="checkbox"/> Increase Muscle Endurance | <input type="checkbox"/> Gain Weight           | <input type="checkbox"/> Injury Prevention              |
| <input type="checkbox"/> Increase Muscle Tone      | <input type="checkbox"/> Improve Eating Habits | <input type="checkbox"/> Reduce Stress                  |
| <input type="checkbox"/> Increase Muscle Size      | <input type="checkbox"/> Sports Specific       | <input type="checkbox"/> Feel Better                    |
| <input type="checkbox"/> Increase Flexibility      | <input type="checkbox"/> Increase Energy       | <input type="checkbox"/> Other                          |

**List any other specific goals below**

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**Long Term Goals**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Please circle the word or phrase below that best summarizes your daily stress levels**

- |     |          |                                    |  |                                    |
|-----|----------|------------------------------------|--|------------------------------------|
| Low | Moderate | High: But I Enjoy<br>The Challenge | High: Sometimes<br>Difficult To Handle | High: Often Difficult<br>To Handle |
|-----|----------|------------------------------------|--|------------------------------------|

**On a scale of 1-10 (10 being the highest), please rate your daily stress levels**

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**On a scale of 1-10 (10 being very painful), please rate your pain level of any current injuries**

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**PLEASE STOP HERE / Trainer Use Only**

**Short Term Goals**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Process Goals**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Notes & Comments**

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