LIFE-STYLE PROFILE

Name:	_ Age:	Date:		
Address:	City:	State:	Zip:	
Marital Status: S M D W (Circle	one) Phone #: _			
Occupation:	How long:			
How long have you lived in the area? _				
Do you plan to stay? Y N (Circle one)				
Children at home? Y N (Circle one)	Are y	ou physically a	ctive? Y N (Circl	e one)
How did you hear about the club?				
Have you been a member of a health o	lub before? Y	N (Circle one)		
How long since you have done any typ	e of systematic	exercise:		
How long have you been thinking about	ut starting an ex	ercise program	?	
	HEAL	TH HISTORY		
To the best of your knowledge, do you	have any limita	itions preventir	ng you from exe	rcising?
When was the last time you had a phy	sical examinatio	on?		
Are you taking any medication? Y $$ N $$ (Circle one) If ye	es, what?		
I hereby state that I am physically able provided by the program.	to proceed wit	h the normal ro	utine of exercis	e and other club facilities
Signed by:		Date:		
	What are yo	ur interests? (C	ircle)	
Improve appearance Lose we	ight	Trim in	ches	Firm and tone
Increase strength Reduce coronary	risk Reduce te	ension Stimula	ate circulation	
Gain weight Increase	e endurance I	mprove athletic	c performance	
Improve posture Sleep better	Relax, hav	ve more fun		
Other:				
Your present weight? You	r best weight?			
Please check the following areas you w	vould like to imp	prove (Circle on	ce)	
Neck Arms Shoulders Chest/Bu	ust Waist	Hips Thighs	s Calves	
Why?				
How soon would you like to see the ch	anges?			

Will you make 30 minutes 2-3 times a week to accomplish your goals? Y N (Circle once) Are you ready to accomplish your goals now? Y N (Circle once) If you were to enroll today, would it be by: Check Cash or Credit card

THE THREE PHASES TO FITNESS LOSE WEIGHT & INCHES 90 DAYS FIRM AND TONE 90 DAYS STABILIZE 90 DAYS TODAY'S SPECIAL RATES

"THE ROAD TO FITNESS"

Date: _____ "Your health is Priceless; we make it affordable"

Thank you for coming in today and most of all, thanks for taking the first step toward a fitness program with the Zoo Health Club. The most difficult part of getting into shape is the first step down the road to health. Once you begin, the next steps are easy because you will start to see the benefits of a planned supervised program designed to meet your personal needs. We appreciate your interest in our club and look forward to serving your needs.

	PLEASE PRINT	
Name:		
Address:		
City: State:	Zip:	
Phone #:	Work:	
Married: YES NO	Children: YES NO	How many?
How did you hear about this club?		
	Please check appropriate spaces	
I exercise sporadically		I have been on an exercise program in the past
I have never exercised before		I am currently on an exercise program
	Health and Fitness goals:	
Strengthen cardiovascular system	Lose inches	Lose weight
Tone & condition	Built muscle	Rehabilitate
Re-proportion	Socialize, relax, meet people	Gain strength
Gain weight		
Iw	ould like my fitness program to cons	sist of:
Aerobic classes	Lifecycle (stationary bike)	Personalized instruction & motivation
Exercise machines	Jogging/Walking	Fitness assessment
	I prefer to:	
Exercise with a friend	Exercise with a professional	Exercise alone
	I prefer to exercise in the:	
Morning	Afternoon	Evening
	My job involves:	
Very little activity	Very little stress	A great deal of physical activity
Moderate amounts of physical activit	у	Great deal of stress

What specifically brought you to The Zoo Health Club today?