

Realize Your Potential!

Athlete profile:

Name _____ Age _____ Height _____ Weight _____ Date _____

Phone _____ Address _____

Email address _____

How long have you been consistently training? Years; _____ Months; _____

How many total hours do you usually train per week? _____ How many days per week? _____

Of those hours how do they break down? Swim; _____ Bike _____ Run _____ Weight training; _____ Other; _____

During the **last 3 months** what was your **longest**; Swim _____ Bike _____ Run _____

During the **last 3 months** how many hours, or miles, have you trained each week?

Swim _____ Bike _____ Run _____ Weight training _____

During the **last month** how many hours, or miles, have you trained each week?

Swim _____ Bike _____ Run _____ Weight training _____

During training, what percentage do you estimate was spent in zones 1 _____ 2 _____ 3 _____ 4 _____ 5 _____

How did you determine your training zones? _____

What is the highest heart rate that you've seen during; Swimming _____ Biking _____ Running _____

Have you ever had a V02 max test or lactate threshold test? _____ If yes, what were the results _____

During the **last year** how many total hours/miles did you train in each discipline?

Swim _____ Bike _____ Run _____ Weight training _____

How many hours per week can you **realistically** train? _____

Please list which days of the week and which hours that you'll be able to consistently train each of those days

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

How many hours of quality sleep do you get per night? _____

How would you rate your current level of motivation to train? Poor ___ Fair ___ Good ___ Great ___

Do you ever feel that your training is unproductive or a burden? Often ___ Sometimes ___ Never ___

Do you ever feel fatigued or exhausted during a training session that **would normally be easy**? Yes ___ No ___

What aspects do you perceive to be your strengths? _____

What areas do you want to improve in? _____

Are there other areas in your life that require a great deal of attention? (Family, work, school, etc.) _____

Why are you seeking the advice of a coach? _____

What role do you want a coach to play in your life? _____

Please list all the races that you are planning on competing in this year.

Please include the **dates, distance, and prioritize** them 1-3 (1 being most important)

Is there anything else you would like to add, or anything that you think I should know about you?

Please use the rest of this page and the back of this form to list any medical information that I should know about. Such as previous, or current injuries or medical conditions that might limit your physical activities or place you at risk for harm or injury.
