

Name: _____

Address: _____

Email: _____

Phone: _____

√ (check the best number to reach you)

Rate the food groups in two ways. First, from 5 (most enjoy) to 1 (least enjoy) and, second, From 5 (eat the right amount) to 1 (overeat OR under-eat) I will know from the food group, which you mean.

	Enjoyment	Amount
fruits and vegetables	_____	_____
grains	_____	_____
fish	_____	_____
meat	_____	_____
beans	_____	_____
low-fat dairy (like yogurt)	_____	_____
cheese	_____	_____
nuts and seeds	_____	_____
desserts	_____	_____
chips	_____	_____
candy	_____	_____

Using a scale of 5 – 1, please rate the following as they apply to you: 5 being the most frequently true for you, and 1 the least often true. Note: don't look for a positive/negative slant to the ratings. Many may seem contradictory. For example, you may hate cooking but still cook regularly. Or you may consider yourself disciplined but feel you are a rebel at heart.

I exercise regularly. ____

If a high rating, I normally exercise _____ days a week.

What are your most common forms of exercise?

I currently eat a basically healthful diet. ____

Once I make up my mind, I stick to things. ____

I like to jump into things. ____

I get easily bored and/or rebellious. ____

I like to take my time and tackle tasks gradually. ____

I'm a procrastinator. ____

I generally eat 3 meals a day. ____

I snack a few times a day. ____

I eat frequently and like to snack often. ____

Restaurants are a common part of my life. ____

I enjoy cooking. ____

I cook often. ____

I consider myself disciplined, ____

I am a born rebel. ____

Eating healthfully on a budget is important to me. ____

Alcohol consumption: I currently drink alcohol ____ days a week, and have ____ drinks per day. I most often drink beer, light beer, liquor, wine. (circle)

Any other factors about you that might be helpful for me to know (ie, medical conditions, medications that affect weight, food allergies, problems that inhibit exercise, etc.)

Weight loss goal: 1 – 10 lbs, 10 – 25 lbs, 25 – 60 lbs, 60+lbs.
circle one

Personal goals: Please write or "bullet" those things you most want to get from Eat Healthy Your Way

Note: I am not a doctor or a nutritionist. My expertise is in motivation and know-how. The program recommended is a Mediterranean style diet that you will adapt to your own preferences. The first night you attend, you will be asked to sign a release that says you understand that and are responsible for your own health. If you have any questions about participating, you need to check with your doctor.

Some sessions may be videotaped for use in a documentary or on a website. No one will be photographed or have their recorded voice used without their signed permission.

Desired start date: _____