

Training Consultation & Strategy Session

Name:		Age:	Height:
Current Weight:	Goal Weight:	Primary Goal: Fat Loss Muscle Gain Total Life Transformation	
1. Injuries or Health Concerns?			
2. What brings you in today?		How long has that been on your mind or affecting you?	
3. Stress Level: Low Medium High		Average Sleep / Night:	Average Hours Seated / Day:
4. Daily Routine & Activity Level?			
5. Current Exercise & Nutrition Habits?			
6. Last time you were in great shape?		What happened?	
7. Worked with a trainer before?		How was your experience?	
8. Imagine we're talking 1 year from now. What's different for you to be happy with your result?			
9. Now, looking backwards what did you change today to get you there?			
10. Training Frequency & Schedule:		1-on-1 PT or Group Training?	
If I can show you a reasonable and effective path to achieve your goals, are you ready to get started today?			
<u>Current/Past Situation</u>		<u>Outcome Desired</u>	
		<p>Why is this important to you right now?</p>	
<u>Movement Assessment</u>		<u>Recommended Road Map to Results</u>	
Squat:	Training Type & Frequency:		
Push Up:	Nutrition:		
Hip Hinge:	Lifestyle Adjustments:		
Row:	Time Frame:		
Core Stability:	"Sound Good?"		
Work Capacity:	<p>Notes:</p>		
Closing:			
"Based upon on you've shared with me, the best next step is..."			
"Does that make sense? What questions do you have?"			
"Here are the options. What do you think fits you best?"			
"Would you like to go ahead and do that? Awesome!"			
Objections:			
"Do you ever get in your own way? Is that happening now?"			
"Taking action is the #1 predictor of success. What can we do today?"			
→ 14DCQS?			