

**TCR BODY TECH  
Registration Form**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Occupation: \_\_\_\_\_ Sedentary or Active (circle one)

1. How did you first learn about TCR BODY TECH? Ad \_\_\_\_\_ Friend \_\_\_\_\_ Internet \_\_\_\_\_  
Other \_\_\_\_\_ (please specify)

2. Are you looking at programs for: (circle one) Yourself \_\_\_\_\_ Spouse \_\_\_\_\_ Friend \_\_\_\_\_  
Other \_\_\_\_\_ (please specify)

3. Do you have any medical limitations? Smoke? If YES, please specify: \_\_\_\_\_

4. Do you exercise now? YES or NO (circle one)

5. How long ago were you at your desired health and fitness level? \_\_\_\_\_

6. How long have you been thinking of improving your health? \_\_\_\_\_

7. If TCR BODY TECH programs meet your needs, when can you start? \_\_\_\_\_

Your age: \_\_\_\_\_ Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight (or body type): \_\_\_\_\_

What do you consider your "ideal" bodyweight to be? \_\_\_\_\_

At your "ideal" weight, what percentage body fat would you like to be (circle one):

	<u>Healthy</u>	<u>Good</u>	<u>Athlete</u>
FEMALE	20-24%	16-20%	<16%
MALE	15-18%	10-15%	<10%

Which of the following benefits are most important to you, select three in order of importance, 1, 2, 3 :

- |  |   |
|--|---|
| _____ Reduce excess body fat           | _____ Tone and condition                                |
| _____ Achieve normal body weight       | _____ Shape/sculpt body                                 |
| _____ Increase energy level            | _____ Gain muscle/lean body mass                        |
| _____ Improve cardiovascular endurance | _____ Increase strength                                 |
| _____ Decrease stress                  | _____ Decrease health risks (BP, musculoskeletal, etc.) |

Now, that we have established your goals it is time to get started:

To assist with your success it might be useful to record your weight and body measurements at the following locations and record them (you will do this every 4 – 6 weeks in order to chart your progress):

For weight loss: Biceps, chest, waist, hips, thighs, calves (expect ½ to 4" loss depending on body part)

For weight gain: Neck, biceps, chest, shoulders, thighs, calves (expect ½ to 4" gain depending on body part)

*"When following an exercise and/or nutrition program recording your progress will become an effective motivational tool for continuing to participate in an active and healthy lifestyle. "*

**WELL...WHAT ARE YOU WAITING FOR...LET'S GET STARTED!!!!**