

Personal

Name:	_____	First Name:	_____
Street:	_____	PO-Box/ City:	_____
Country:	_____	Date of Birth:	_____
Handy Nr.:	_____	Email:	_____
Height:	_____	Weight (in kg):	_____

General Questions

What is your goal with Lebe Stark?

Do you have any experience with weight training?

Is training a matter of necessity or fun?

What's your relationship with food?

Tell us how fit you are:

Not fit 1 2 3 4 5 6 7 8 9 10 *Highly trained*

How active are you in your spare time? (Walking etc.)

How did you find out about Lebe Stark?

Social Media Friends/ Family Ads (*Out of door, Online*)

Health Check

Health Check Questions	No	Yes	Additional Information
1. Are you seeing a doctor?			
2. Are you seeing a physiotherapist?			
3. Did you have any surgeries?			
4. Are you experiencing back pain?			
5. Are you experiencing shoulder pain/ stiffness?			
6. Do you have any joint pain?			
7. Are you on medication?			
8. Do you have high blood pressure?			
9. Do you have any allergies?			
10. Do you have cardiovascular diseases?			
11. Asthma, Bronchitis or Diabetes?			
12. Any information we should know about your health?			
13. Do you have healthy kidneys?			
14. Is your stress level elevated?			
15. Are you sitting often during work?			

Health Disclaimer

If multiple answers to these questions presented above contain a „**Yes**“, there might be an elevated health risk. It is recommend for you to see your doctor first before engaging any further. Client statement: **„I am aware that answering more than 60% of the presented health check questions with „Yes“ might present a health risk. However, I want to take a pass on consulting my doctor and start with Training right anyway.“**

In joining our personal training sessions, you agree that you are physically and mentally suitable and equipped to follow this program. Please consult your physician or doctor if you're not sure whether you fit this kind of workout program or not.

Lebe Stark Personal Training is not responsible for any illness, safety risk or injury that may occur during this program. The use of the information in this course is solely at your own risk.

Date:	Signature Client	Coach (G. Dzemaili):
		