



Golf Fitness Profile

First, tell us about yourself

Age

- | | | | |
|----------|-----------|-----------|----------|
| 1. <15 | 2. 16-19 | 3. 20-25 | 4. 26-30 |
| 5. 31-35 | 6. 36-40 | 7. 41-45 | 8. 46-50 |
| 9. 51-55 | 10. 56-65 | 11. 66-75 | 12. 76+ |

Height

Weight

Gender

- | | |
|---------|-----------|
| 1. Male | 2. Female |
|---------|-----------|

You play golf:

- | | |
|-----------------|----------------|
| 1. Right-handed | 2. Left-handed |
|-----------------|----------------|

Now, tell us about your Workout and Golfing preferences

How long have you been working out?

- | | | |
|-----------------------|----------------------|---------------------|
| 1. Less Than 6 Months | 2. 6 Months - 1 Year | 3. More Than 1 Year |
|-----------------------|----------------------|---------------------|

How many sets would you like each exercise to default to?

- | | | |
|----------|-----------|-----------|
| 1. 1 set | 2. 2 sets | 3. 3 sets |
|----------|-----------|-----------|

Would you like to integrate cardio into your program?

- | | |
|--------|-------|
| 1. Yes | 2. No |
|--------|-------|
-

Equipment check

What equipment do you have access to? (Please check all that apply)

Cardio

- | | | | |
|--------------------|--------------|-------------------|-----------------------|
| 1. Stationary bike | 2. Treadmill | 3. Recumbent bike | 4. Elliptical trainer |
| 5. Stairmaster | 6. None | | |
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Strength

- | | | | |
|-----------------|------------------------|----------------------|----------------------|
| 1. Free weights | 2. Cable cross machine | 3. Circuit equipment | 4. Universal machine |
| 5. None | | | |
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Functional Training

- | | | | |
|------------------|--------------|------------------|------------|
| 1. Medicine ball | 2. Total Gym | 3. Foam roller | 4. Bowflex |
| 5. Slide board | 6. None | 7. Weighted club | |
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What days of the week would you prefer to work out?

Mon. Tues. Wed. Th. Fri Sat. Sun