

# **Athlete Information Package**

Date:				

All information received on this form will be treated as strictly confidential. Please fill out the forms as accurately as possible. This information is essential to develop a safe and effective program that addresses your needs, goals and interests.

ame: Date of Birth// Age:			-		
			N	M D Y	
Address:Street	. A	Apt	City	Postal Code	
Phone:	(П)	(C) En	ıaıı:		-
Waking Pulse, if Knowr	ı:	Weight:		Height:	
Best time to reach you:					
Your Health History	:				
1) Have you or anyone	in your family h	ad coronary artery	disease? If y	es, explain:	
2) Do you ever have ch	est, shoulder, ne	ck, or arm pains a	fter exercise?	If yes, explain:	
3) Have you ever fainted	d, felt dizzy, or u	unusually winded	after exercise?	If yes, explain:	
4) Has a doctor said that	t your blood pres	ssure is too high o	r uncontrolled	? If yes, explain:	
5) Has a doctor ever said	d you have heart	trouble, a heart m	urmur, or that	you have had a heart attack?	If yes, explain:
6) Are you diabetic, have a thyroid condition, or any chronic condition? If yes, explain:					

7) Are you using any medications? If yes, explain:	
8) Is your cholesterol level high? What's your cholesterol count?	
9) Do you have any condition that a doctor says may limit your exercise? If yes, explain:	
10) Have you ever smoked? When did you quit?	-
11) Have you ever had a joint or back disorder or any current injury? If yes, explain:	-
12) Have you had surgery in the last 12 months? If yes, explain:	
13) Are you now, or have you been pregnant in the last three months?	_
Your Athletic History:	
1) List your favorite sports and years of participation.	
2) Do you currently have a strength training routine? If yes, describe (machines or free weights, days per reps, resistance, etc.).	week, sets
3) Please rate your familiarity with strength training routines:	
4) Have you ever had an exercise related injury which caused you to stop exercising for a week or more? explain.	If yes,
6) List your best race times, with splits if possible.	

## **Your Current Athletic Information:**

be measurable a) b) c) At the completion mportant thing we need to be measurable.	n of our first season together, how will we kn	now if we were successful?	What is the single most
14a) What is your train	ining week like now?  Type of workout	How long	How hard
Monday	(run, strength training, x-train)		
Tuesday			
1 acoda y			
Wednesday			
Wednesday			
Wednesday			
Wednesday Thursday Friday			

5)	5) What is your longest workout in the last 3 weeks? Describe.				
6)	How many weekly hours do you have available to train? Be realistic.				
7)	What time of day do you expect to do most of your training during the work week?				
8) I	Do you have access to a track?				
9) (	Can you attend Tuesday Night Track (at McCullough Jr. HS) on a regular basis?				
10)	Do you run with a running club?				
11)	Do you ever train with a group? If yes, how many days per week?				
12)	Which day is best for you to take off from training?				
	How many miles and/or hours did you train in the past 12 months?				
14)	What were the most important races you did in the last 12 months?				
1.5)					
	Do you have a heart rate monitor? If yes, which model.  How familiar are you with training with a heart rate monitor?				
17)	What is the highest heart rate you have observed while running?				
18)	Do you know your lactate threshold heart rate (LTHR)? Please list				
19)	Do you know your VO2max for running? Please list				
10)	Do you have a GPS anabled watch? If was which model				

### **Limiters:**

In order to focus your training most efficiently, we need to determine your limiters: those aspects of fitness that are limiting your current performances. Please take a few moments to assess your abilities on a score of 1-5.

- 1 = among the worst in my race category
- 3 = about the same as others in my race category
- 5 = among the best in my race category

See descriptions of each ability below.

Abilities/Techniques	Run
Endurance	
Force	
Speed Skills	
Muscular Endurance	
Anaerobic Endurance	
Power	

### **Definitions:**

Endurance is the ability to delay the onset and reduce the effects of fatigue, implies an aerobic level of conditioning.

Force is the ability to overcome resistance: how well you run hills, or in the wind.

Speed Skills is the ability to move effectively while running. A measure of economy and technique.

<u>Muscular Endurance</u> is the ability of the muscles to maintain a relatively high force load for a prolonged time. A combination of force and endurance.

Anaerobic Endurance is the ability to resist fatigue at very high efforts when leg turnover is rapid.

Power is the ability to apply maximum force quickly.

Miscellaneous Factors	Poor	Good	Excellent
Time to train			
Injuries			
Health			
Body strength			
Flexibility			
Mental skills			
Body composition			
Nutrition			

Comments or Questions:				

Please consult your physician before starting this or any exercise or training program.

#### WAIVER

I acknowledge that training for and/or participating in a triathlon, duathlon, cycling, swimming, running or any other endurance sporting event is an extreme test of my physical and mental limits and that such training and/or participation poses potential risks of serious bodily injury, death, or property damage. I have provided Dana Lyons with all information which in any way relates to or that could affect my physical health and attest that I am in good health and my physical condition has been verified by a licensed medical doctor.

Furthermore, in return for my participation in this program, I on behalf of myself and my heirs or executors I hereby:

- a) WAIVE, RELEASE, and DISCHARGE Dana Lyons, his officers, directors, administrators, employees, consultants, coaches and agents from any claims, costs or liabilities for personal injury, illness, death or damages of any kind which I may have now, or at any time in the future, resulting from participation in this or any other program;
- b) **AGREE NOT TO SUE** any of the persons or entities mentioned above for any claims, costs or liabilities that I have waived, released or discharged herein;
- c) **INDEMNIFY, DEFEND, and HOLD HARMLESS**, the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions.
- d) CONFIDENTIAL and PROPRIETARY INFORMATION Dana Lyons shall provide substantial confidential information and trade secrets, or access thereto, relating to the Finish Strong Coaching's business. Such information shall include, but shall not be limited to, effective techniques proven to be successful in the markets in which Finish Strong operates; training in the functionality and operation of Finish Strong Coaching proprietary system and workout regimes and the manner in which such may increase clients effectiveness and efficiency in performing and results; and other confidential and proprietary information of the Finish Strong Coaching. The client understands and agrees that this Confidential Information constitutes distinct consideration for the obligations in this Agreement, and that the non-compete provisions of this Agreement are intended to protect the Confidential Information provided to the client. Client agrees and understands that all Confidential Information is at all times and shall remain the confidential and proprietary property of Company. Client agrees not to reveal, disclose or communicate, directly or indirectly, any of the Confidential Information to anyone outside of Finish Strong Coaching. Client further agrees during the term of this Agreement and for a period of two (2) years thereafter, not to use, directly or indirectly, any of the Company's Information except in the course of his engagement with Finish Strong Coaching. The client acknowledges that Finish Strong Coaching diligently protects the Confidential Information against exposure to third parties and that Confidential Information is accessible only by limited individuals. Confidential Information shall not include information known to the client prior to this Agreement or information which becomes known to the public other than through disclosure by Finish Strong Coaching.

Additional Restrictive Covenants (a) While client is be coached by Finish Strong Coaching and for a period of two (2) years following the later of (i) the last day of the Term or any Renewal Term, if applicable, or (ii) the termination of this Agreement, client shall not:

- (i) provide or perform, within Montgomery County, Texas, the same or similar services performed by Finish Strong Coaching on his own behalf or on behalf of any other person or entity;
- (ii) call upon or solicit any customer whose account is or has been serviced in whole or in part by Finish Strong Coaching with the purpose of attempting to sell to any such customer any services included within those services provided by Finish Strong Coaching; or

Print Name:	Signature:
Date:	