

Consultation Questionnaire

When you have completed this form please save it and send to: consult@foodnsport.com

CONTACT INFORMATION:

*required fields have red outline

Name:

Email address:

Telephone number:

Occupation:

Mailing Address:

City:

State:

ZIP code/Post code:

Country:

PERSONAL INFORMATION:

What is your date of birth?

What is your gender?

What is your relationship status, are you single, married, divorced, other?

Height:

Weight:

Body Fat % (if known):

LIFESTYLE INFORMATION:

Please give three or more typical day's worth of food, if your diet is extremely varied. If one day tells the story, then one day is sufficient:

Outline your physical activities:

How many hours sleep do you get on average per week?

HEALTH HISTORY:

Health history specific to your consult:

Do you smoke, or have you ever smoked? Yes No

If yes, for how long and how much?

Do you drink alcohol? Yes No If yes, please give details of your alcohol consumption:

Do you consider yourself to be currently experiencing a lot of stress in your life? Yes No

If yes, do you know what from?

How long ago did you last take antibiotics?

Are you currently on ANY medication (prescription or over-the-counter) ? Yes No

If so, please give details:

Have you recently been hospitalized? Yes No If so, please give details:

Have you ever undergone major surgery? Yes No If so, please give details:

If female:

Are you currently pregnant? Yes No If so, how many weeks?

Have you recently (in the past year) given birth? Yes No

If so what sort of delivery did you experience?

Are you still nursing any children? Yes No

What are the ages of your children?

GOAL AND BACKGROUND INFORMATION:

I wish to help you in reaching goals; not to superimpose mine upon you. A clear understanding of your goals will help us stay focused. This list may be short or long, specific or general.

What do you hope to gain from our work together?

How would you prefer to consult? Email/Telephone:

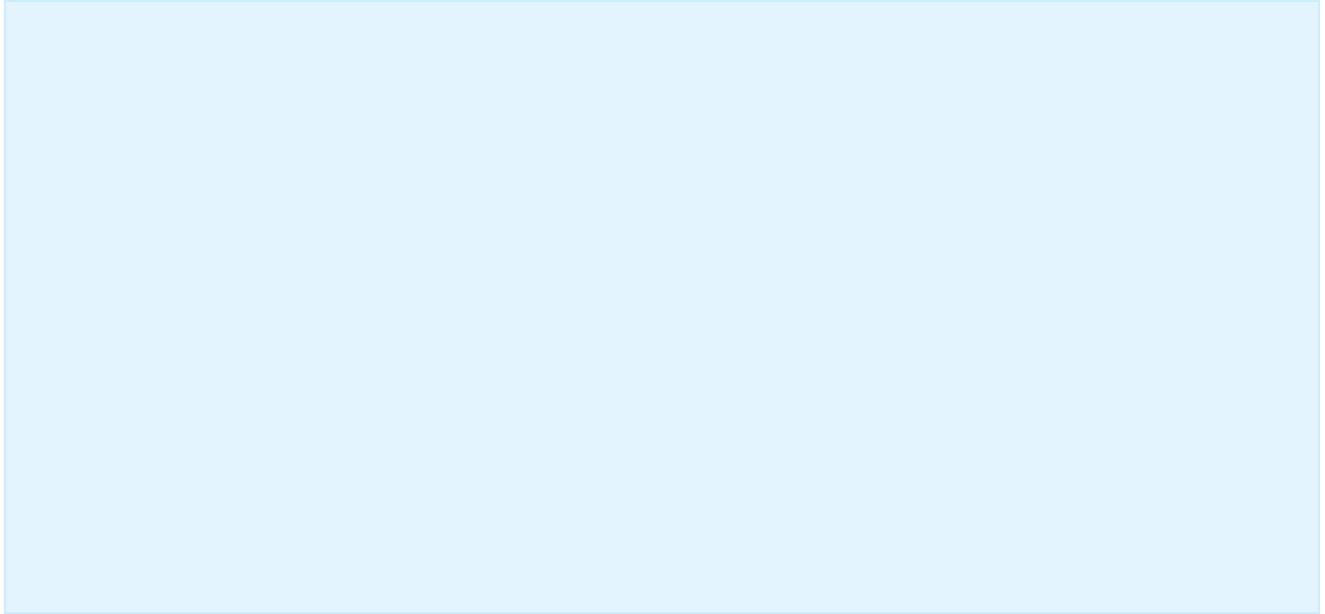
Which of Dr. Graham's educational books, CDs and DVDs do you own?

How did you hear of Dr Graham/FoodnSport?

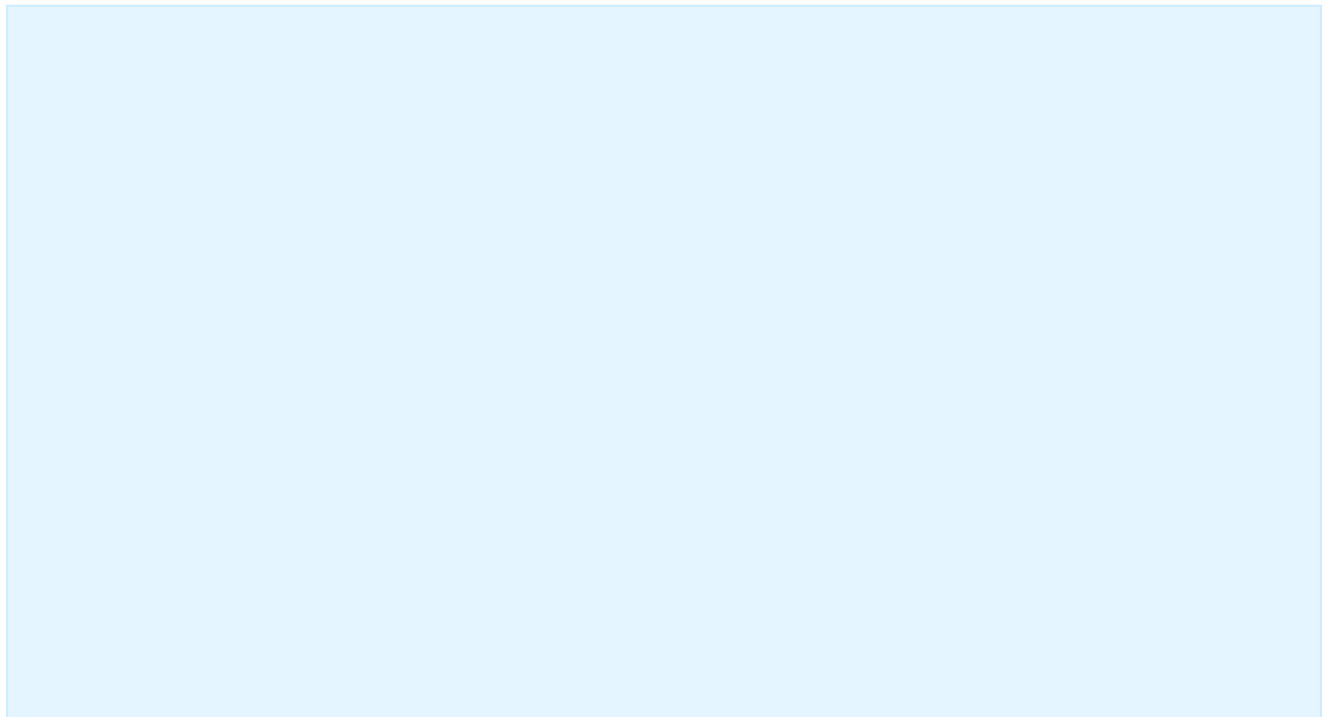
YOUR QUESTIONS:

Many people have difficulty actually forming their questions, so in order to save us time and money, please write them below, as clearly and succinctly as possible. Your questions, and how you state them, will tell me a lot about understanding of issues. It will help me in creating an appropriate level of response. Of course, more questions will come up as we speak, and after we speak. We will address them as well, eventually, if you like. Subsequent questions tend to be more concise.

What questions do you have?



Is there any information you feel is vital for me to know about you, or anything you want to add?



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