



**ATHLETE QUESTIONNAIRE**

Name \_\_\_\_\_ Date \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Current State of Health \_\_\_\_\_

Medications \_\_\_\_\_

If currently injured or sick, describe difficulty and date of onset: \_\_\_\_\_

Health Risks (ie family history, chronic disease, etc): \_\_\_\_\_

Running Interests (check all that apply):

Fitness & Fun \_\_\_ Recreational/Social Racing \_\_\_ Training for Multi-Sport \_\_\_

Racing for Improved Performance \_\_\_ Road Running \_\_\_ Trails \_\_\_

Racing for Awards (overall/age group/Boston Qualifying, etc) \_\_\_

How long have you been running? \_\_\_\_\_

Would you consider yourself a Novice \_\_\_ or Experienced Runner? \_\_\_

Racing Experience: None \_\_\_\_\_ Novice \_\_\_\_\_ Experienced \_\_\_\_\_

How many miles per week have you averaged over the past three months: \_\_\_\_\_

Have you ever done "speed" workouts, interval training, or "effort sessions": Y \_\_\_\_\_ N \_\_\_\_\_

Comments and details:



Recent or Chronic Running Injuries:

Describe any problem with previous training or racing:

Most recent racing results, include distance, pace/time, and date:

Describe your current training goals—what are you trying to accomplish and by when?

Running Personal Bests:

| Distance      | Time | Year |
|---------------|------|------|
| Mile/1500     |      |      |
| 5k            |      |      |
| 10k           |      |      |
| Half-Marathon |      |      |
| Marathon      |      |      |
| Other         |      |      |
| Other         |      |      |

Additional Comments or Concerns: