

GRAY MONTANA



FITNESS & CONDITIONING

Goals/Exercise History  
Please Be as Specific As Possible

What are your **PRIMARY** Health, Fitness, and/or Athletic Performance Goals/Objectives?

Please describe in as much **DETAIL** as possible your current Exercise, Training, or Physical Activity Routines:

Please provide an indication of Exercise **Intensity** [Highest heart rates achieved/observed during any exercise; cycling power outputs, average walking/running pace, recent race or event times.

Please list **ANY** exercise equipment that you currently own that may be used to augment home exercise sessions?

Requested Important Exercise: For a 5-7 day period prior to initial consult please ascertain early morning [basal] heart rates using the instructions on Gray Montana FC website. Please record these values. This information will be used to devise your individual **Target Heart Rate Training Zones**.