



TRIMASTERS COACH

PERSONAL DATA WORKSHEET

www.trimasterscoach.com

Please complete the following information and return form to: info@trimasterscoach.com

Personal Information

First Name:

Last Name:

Address Line 1:

Address Line 2:

City:

State:

Zip:

Home Phone:

Work Phone:

Email:

Height: feet inches

Weight: lbs.

Birth date:

Occupation:

Do you have any health related problems? If so, please mention below:

Race Schedule

Please list below your "A" Race(s):

Please list below additional scheduled 2010 Races:



Athletic Background

Swimming

Number of times you currently swim per week:

Do you have access to open water for swimming?:

Do you belong to a Masters Swim program?:

Average pace for 100 m or yd:

Cycling

Current Avg Weekly Mileage:

Do you own an indoor training device?

If so, what type?

Do you own a wattage measurement device?
(e.g. Powertap, etc.)

Does your bike computer have a cadence feature?

Do you belong to a cycling club?

Running

How often do you run?

Current Avg Weekly Mileage:

Average longest run each week:

Do you belong to a running club?

Other Information

Do you own a heart rate monitor?

Does your HRM interface with your PC?



Results

Cycling

Pertinent Cycling Results:

Running

What is your 5k PR?

What is your 10k PR?

What is your Half Marathon PR?

What is your Marathon PR?

Additional Pertinent Running Results:



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Triathlon

What is your Olympic PR?

Please provide Name, Location, Date, Distances and Splits as available:

What is your 70.3 (Half IM) PR?

Please provide Name, Location, Date, Distances and Splits as available:

What is your 140.6 (Ironman) PR?

Please provide Name, Location, Date, Distances and Splits as available:

Lifestyle

Provide the number of hours available to train each day

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday:

Please add any additional thoughts you may have for your coach: