

Exercise Habits & Interests Questionnaire

Today's Date: _____ Your Name: _____

Recent Exercise Habits:

How many times per week are you active enough to break a sweat? _____

When you exercise, how long are you active? _____ minutes

On a scale from 1 to 10, how intense is your typical activity? _____

How many years have you exercised? _____

In a Typical Week, How Many Minutes Do You Spend in the Following Activities?

Running/Jogging _____

Walking _____

Aerobics _____

Racquet Sports _____

Swimming _____

Weight Training _____

Biking _____

Skiing _____

Stair Climber _____

Yoga/Pilates _____

Other _____

Place a Check Next to Your Activity Preferences or Interests:

- Aerobics Class
- Group Activities
- Running
- Swimming
- Other

- Free Weights
- Martial Arts
- Spinning
- Tennis

- Golf
- Outdoor Cycling
- Step Aerobics
- Walking