

BO WEBSTER TRIATHLON COACHING QUESTIONNAIRE						
Date:		H	C			W
Name:	Phone:					
USAT # :	E-mail:					
Address:						
Occupation:				Current hrs(or dist)/wk training:		
DOB:				Swim	hr	yd
Height:	Weight:			Bike	hr	mi
				Run	hr	mi
Gym Membership:(Y, Bally's, etc.):				Other	hr	
List your best times (within 1 yr and lifetime) for the following distances (blanks are ok):						
		Current (last 12 mos)		Lifetime		
		Time	Date	Time	Date	
Swim	100yd					
	500yd					
	1650yd (1.5k)					
Bike	10mi					
	24.8mi (40k)					
	100mi					
Run	1mi					
	6.2mi (10k)					
	26.2mi					
Triathlon	1.5k/40k/10k					
	Ironman					
	other					
Medical Conditions:						
Current Medications:						
Current or Recent Injuries:						
Goals for near and long term:						
For example: Complete a sprint tri , Improve my weak event, Finish St Anthony's in a particular time, Qualify for Ironman Hawaii						
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