



Personalized Triathlon Training

Registration and Athlete Profile

REACH YOUR POTENTIAL!

Registration... It's easy

Please Print

Name: _____

Age: ____ Date of birth (MM/DD/YYYY): _____ Sex: F M

Address: _____ City: _____

State: ____ Zip: _____ Cell Phone: _____

Email: _____

Are you a current member of USA Triathlon (circle)? Yes No

****Monthly sign up is a minimum of 3 months**

Personalized Coaching Program \$300 for 3 months or \$100/Month: _____

Running Analysis Session or Private Session \$50/hour _____

Total: \$ _____

*Fees are non-refundable and non-transferable.

Pam Houck and Amesbury is not responsible for any accident or injury on Lake Gardner premises and local towns' roads in Massachusetts and New Hampshire. I also give my consent to appear in photographs for potential marketing purposes.

Signature:

Payment is by check or cash. Check is payable to Pam Houck

Bring Registration form to class with payment, or mail all to:

Pam Houck

19 Glen Devin Street

Amesbury, MA 01913

Questions: Cell 978-697-5627

Email: pahouck@gmail.com

This profile questionnaire is an assessment of your current fitness, capabilities, and goals. This gives us an understanding of your fitness of each sport to create the training program. If you are not sure leave it blank.

Please Print

CURRENT WORKOUTS/HISTORY

Have you ever participated in a triathlon (circle)? Yes No

From the strongest (1) to weakest (3), put a number for each sport: ___Swim ___Bike ___Run

Have you swum with a group (circle)? Yes No

Currently, what is your longest continual swim (specify miles or yardage)? _____

What is your average swim yardage? _____ How many days a week are you swimming? _____

What days are you swimming? _____

Have you done open water swimming (circle)? Yes No

Do you bike on the road (circle)? Yes No If yes, answer the following questions:

How many miles a week on the average you bike? _____ miles.

How many days a week is your biking? _____

What is your average pace? _____ mph. (If not sure, leave it blank).

Have you biked with a group (circle)? Yes No

Are you currently running (circle)? Yes No If yes, answer the following questions:

How many miles a week on the average do you run? _____

How many days a week is your running? _____

Do you run with a group (circle)? Yes No

What is your length of your longest run? _____ miles. Time of run (hr:mm:ss) _____

Have you done road races (circle)? Yes No If yes, fill in the following:

5K: Number Done: _____ Best time: _____ Date: _____ Current time: _____

5 mile: Number Done: _____ Best time: _____ Date: _____ Current time: _____

Half Marathon: Number Done: _____ Best time: _____ Date: _____ Current time: _____

What is your typical training week now (give some details: time of day, distance, workout type (speed or easy)):

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

Have you done triathlons (circle)? Yes No If yes, fill in the following:

Sprint: Number Done: _____ Best time: _____ Date: _____ Current time: _____

Olympic: Number Done: _____ Best time: _____ Date: _____ Current time: _____

Half Ironman: Number Done: _____ Best time: _____ Date: _____ Current time: _____

What are your goals in the triathlon training?

1

2

3

4

5

What races are you planning to do this year? (Race name and date)

1

2

3

4

5

What injuries had in past or current and information the coach should know?

Look forward to training you to reach your goals in competing in triathlons.

USAT/RRCA Coach Pam Houck