



Please answer the following questions on a scale of 0 to 7 (0 = not likely/not important, 7 = extremely likely/important, then add up your score):

1. How likely are you to have *dinner together* as a family at least 4 nights a week at a table without TV or any other screen activity? ____pts.
2. How likely are to try and eat *three balanced meals* a day starting with breakfast? ____pts.
3. How likely are you to avoid sugar-containing and other calorie-laden *beverages* with rare exceptions? ____pts.
4. How likely are you to provide a *fruit and/or vegetable* at every meal? ____pts.
5. How likely are you to insist on *physical activity* for every family member including yourself an average of thirty minutes a day (could be combined to be an hour, three days a week, or something similar)? ____pts.
6. How likely are you to change your *shopping habits* (i.e. making a list ahead of time, shopping the perimeter of the market, limiting impulse buy items not on your list)? ____pts.
7. How likely are you to discuss *dining out* possibilities beforehand (i.e. menu selections, which restaurant is best choice, etc.)? ____pts.
8. How likely are you to ask for a food to be *prepared differently* than what is stated on the menu? ____pts.
9. How likely are you to role model a healthy lifestyle by *bringing better snack choices* to sporting events and/or discussing strategies around “treats” at special events like birthday parties and amusement parks? ____pts.
10. How likely are you to *not* (10 being least likely) eat a snack (cereal, chips, cookies, treats) after your dinner meal? ____pts. Ex. If you *never* eat snacks post-meal give 10 pts.

Total Points _____ (out of 70)

(Please bring this questionnaire to your Fitness Assessment appointment or 1st Club visit)