

## NUTRITION OPTIMIZATION SERVICES - INTAKE FORM

<b>FORM COMPLETE BY:</b>	
<b>TODAY'S DATE:</b>	
<b>NUTRITION SESSION DATE &amp; TIME:</b>	
<b>TEAM NAME &amp; SPORT:</b>	
<b>COACH/TEAM MANAGER EMAIL:</b>	

Please answer the following questions with as much detail as possible to help the dietitian prepare in advance. Email completed form to [aluk@richmondoval.ca](mailto:aluk@richmondoval.ca) and [jcheng@richmondoval.ca](mailto:jcheng@richmondoval.ca) as soon as possible.

1. What is the age range of your athletes? (indicate if <b>most</b> athletes are a given age)
2. What level of sport do they play? (i.e. recreational, provincial, national)
3. What type of nutrition session do you prefer? (select preferred) Note: Prices may vary depending on your selection below.
a. Lecture Style PowerPoint Presentation in Classroom Setting
b. Hands On Cooking Workshop w/ Take Home Recipes in Oval Kitchen
i. Known food allergies of everyone attending workshop: (please list)
c. Other (please describe):
4. What nutrition topics would you like to cover in your seminar? (Please list topics in order of priority)
5. What are some of the concerns the coaches, athletes, or their parents have regarding nutrition and eating habits?
6. Have the athletes worked with a dietitian before? If yes, please describe.
7. How many athletes, parents, and coaches will be attending the seminar?
8. Additional Comments