



# Inquiry Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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Address: \_\_\_\_\_

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City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

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E-mail Address: \_\_\_\_\_ Add to Newsletter: Y N

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Employer: \_\_\_\_\_

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Referred by: \_\_\_\_\_ Medication: \_\_\_\_\_

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Primary Physician: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

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Insurance Provider: \_\_\_\_\_ HSA/FSA: Y N

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DOB:     /     /                      Age:                      Height: \_\_\_\_\_

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Weight:                      Desired Weight: \_\_\_\_\_

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Have you tried to achieve this goal in the past? Y N

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If yes, how?

Below is a list of common food choices. Please go through and highlight/circle the food items you prefer NOT to have included in your meal plan.

<b>Fruit</b>	<b>Vegetables</b>	<b>Grains/Starchy Vegetables</b>	<b>Meat/Meat Substitute</b>	<b>Dairy</b>	<b>Fat</b>
Cantaloupe Watermelon Apple Banana Orange Strawberry Pear Grapefruit Grapes Peach Pineapple Unsweetened Fruit	Tomato Broccoli Zucchini Mushrooms Lettuce Carrots Cucumber Cauliflower Onion Celery Spinach Juice	Rice Pasta Noodles Bagels Oatmeal Grits Potatoes Sweet Potato Corn Beans Whole wheat bread Pretzels Cold Cereal Crackers	Chicken Tofu Fish Sirloin Cheese (Low-Fat) Lean Roast Beef Lean Ham Lunch Meat (Low-Fat) Beans Eggs	Skim Milk 1% Low-Fat Cheese Low Fat Cottage Cheese Yogurt Greek Yogurt	Bacon Margarine Butter Peanuts Salad Dressing Seeds Sour Cream Cream Cheese Avocado Hummus

For more information contact [tntgetfit.com](http://tntgetfit.com) / (704) 549 - 9550