

Member of the Month Spotlight

Name _____ Age (optional) _____

Email address: _____

Phone: _____

What is your occupation? _____

Are you retired? _____

Are you a student? _____ If so, where? _____

How long have you been coming to Saco Sports & Fitness? _____

What made you decide to start coming? _____

Have you been able to reach your goals? _____

If yes, how did you accomplish that and did have help and/or support? _____

What are your health/fitness plans for the future? _____

**please use back if more room is needed.*