

**UCR'S GET FIT TEAM CHALLENGE
APPLICATION FORM
DUE Friday, March 11TH, 2011 @ 4:30 PM**

NAME: _____ PHONE: _____

EMAIL: _____ AGE: _____

MALE: _____ FEMALE: _____

FULL TIME STUDENT _____ PART TIME STUDENT _____

NAME: _____ PHONE: _____

EMAIL: _____ AGE: _____

MALE: _____ FEMALE: _____

FULL TIME STUDENT _____ PART TIME STUDENT _____

ARE YOU BOTH AVAILABLE Wednesdays FROM 3:15-4:15?

Yes _____ No _____

Yes _____ No _____

HOW HAVE YOU TRIED TO LOSE WEIGHT IN THE PAST?

Person(1): _____

Person(2): _____

WHAT'S YOUR BIGGEST OBSTACLE WITH LOSING WEIGHT?

Person(1): _____

Person(2): _____

HOW MUCH WEIGHT DOES EACH OF YOU WANT TO LOSE? _____

**TO SEE MAXIMUM RESULTS YOU MUST BE WILLING TO COMMIT TO A
MODERATE INTENSITY FOR THE FULL DURATION OF THE CONTEST.**

**IF YOU DO NOT THINK YOU CAN COMMIT TO THE FULL 9 WEEKS,
PLEASE DO NOT SUBMIT AN APPLICATION.**

Drop off your application and fee to the Campus Health Center.

THE BIGGEST LOSER PROGRAM IS SPONSORED BY THE PREVENTIVE CARE
ADVOCATES & THE PREVENTIVE CARE CLINIC @ THE CAMPUS HEALTH CENTER