



Rider Questionnaire: please fill out the following and email to andy@ciclismocoaching.com

Name:

Age:

Phone:

Address:

E-mail:

Any pre-existing injuries or medical conditions:

Years riding:

Strengths as a rider:

Weaknesses As a rider:

Last year's success:

Last years biggest struggles:

Ambitions for this coming year:

Worst fear for this coming year:

If you have specific goals for any or all of the upcoming seasons, please list them

Seasons:

Winter:

Spring:

Summer:

Fall:

Do you have any long term cycling goals? If so where do you see in 3 years?