

## **Application for Team MBM Coaching**

Please answer the following questions and send to - [aj@madebymorriscoaching.com](mailto:aj@madebymorriscoaching.com)

For the initial assessment to take place, we need to start with the **BASICS**. For any application to be considered I will need a minimum of **4 CURRENT physique** photos accompanied by any recent contest photos (if you have competed before). Ideally, these will consist of your chosen category posing criteria, from the front, side and rear.

Team MBM accepts a **WIDE** range of clientele. If you are a **FIRST TIME** competitor, a male or female, located in any country, professional or amateur, we will be willing to take any **HARD WORKING** individuals onboard.

Application is limited - it's capped and selective, so appreciate that the response to your application may take as long as 2 weeks.

Please take **TIME** out to write the answers and think carefully about how you respond, the **GREATER THE** detail the better.

Please give as much information to the following -

1. FULL NAME -

2. EMAIL ADDRESS -

3. NATIONALITY / CURRENT COUNTRY OF RESIDENCE -

4. HOW DID YOU HEAR ABOUT TEAM MBM -

5. ARE YOU LOOKING FOR CONTEST PREP/OFF SEASON/BOTH -

1. AGE -

2. ROUGH HEIGHT -

3. CURRENT BODYWEIGHT (AM) -

4. LAST CONTEST WEIGHT IF APPLICABLE -

5. HAVE YOU COMPETED BEFORE? If so, list shows/results/category -

6. DO YOU PLAN TO COMPETE? If so, what year, what category/federation? -

• **DESCRIBE YOUR CURRENT APPROACH TO WEIGHT TRAINING** - Frequency, rep ranges, intensity, split,

DESCRIBE YOUR 'EXERCISE POOL' - Exercises that work very well for you as an individual or ones that you have been able to progress for a long time. Likewise, any exercises which you cannot do or hate?

LIST ANY CURRENT OR PAST INJURIES -

- DESCRIBE YOUR CURRENT CARDIO PROTOCOL - Duration, Type, Frequency -

- DESCRIBE YOUR CURRENT DIET - List current macros if possible, an outline of a NORMAL day of eating, do you eat out regularly or have cheat meals?

OUTLINE ANY CURRENT DIGESTIVE ISSUES - bloating, discomfort, loose stools or hard to pass -

- LIST CURRENT SUPPLEMENTATION - Current health supplements, Have you been BANNED substance FREE for your entire life?

DESCRIBE YOUR CURRENT OCCUPATION -

ARE YOU EXPERIENCING ANY LIFE STRESSORS RIGHT NOW? -

GIVE ME AN IDEA OF YOUR DAY TO DAY ROUTINE, including when you train, eat and work.

GIVE ME AN IDEA OF YOUR CURRENT SLEEP SCHEDULE - any sleep supplements used, how you relax in the evenings, the current quality and length of sleep.

**IF YOU HAVE COMPETED BEFORE - ANSWER THE FOLLOWING -**

- WHAT WERE YOUR LOWEST CALORIES IN YOUR LAST PREP?

- HOW MUCH CARDIO DID YOU COMPLETE AT THE PEAK LEVEL?

- DID YOU HAVE A COACH? HOW DID YOU FIND THE SERVICE?

- WOULD YOU LIKE ASSISTANCE WITH PICKING YOUR NEXT SHOW?

FINAL QUESTION - WHY do you love bodybuilding? What is your ULTIMATE GOAL & how do you believe you are going to achieve it?