## Agreement with Self: Envisioning my Journey to Health



I have decided to make changes in my life because... (list as many reasons as you like)

I want to reach the following specific goal(s) (list specific, realistic goals that excite and motivate you):
After one year of eating nutritious food, exercising regularly and managing stress, here's how my life could look:
I feel
I can do
My lab tests show
I look
In order to reach my goals, I am willing and able to <i>(tick box where applicable; be brutally honest, please*)</i> Book coaching sessions well in advance and stick to the schedule as closely as possible
<ul> <li>Make time to complete assignments and practice new habits in-between sessions (2-3 hours/week)</li> </ul>
<ul> <li>Plan meals; prepare meals from scratch; try new foods</li> </ul>
Reduce or eliminate sugar, refined carbohydrates, processed & fast food, tobacco, caffeine and alcohol
□ Engage in daily physical activity (even gentle)
<ul> <li>Allot 8 hours/night for sleep; be willing to change daytime and bedtime routines</li> </ul>
<ul> <li>Address stressors that may be affecting my health (for instance: work, relationships, money, etc.)</li> </ul>
<ul> <li>Commit fully to the program for six months, even when I'm tired, stressed or progress is slow</li> </ul>
Be willing to let go of old habits and beliefs that don't serve me (such as: "I can't cook" "I don't like
vegetables" or "Weight loss is all about willpower.")
Be patient, forgive myself when I trip up, & share any setbacks with my coach or accountability partner
*If you answer "no" to any of these questions, it may be hard to reach your goals. Let's talk. <u>Schedule a free 30-min call</u> .
What / who could hinder me from sticking to my program? How could I prevent this from happening?
Who will support me? (E.g., partner, doctor, nutrition coach) (Please give them a signed, completed copy of this document.)
with will support the: (e.g., partner, doctor, nutrition coach) (Please give them a signed, completed copy of this document.)
Name