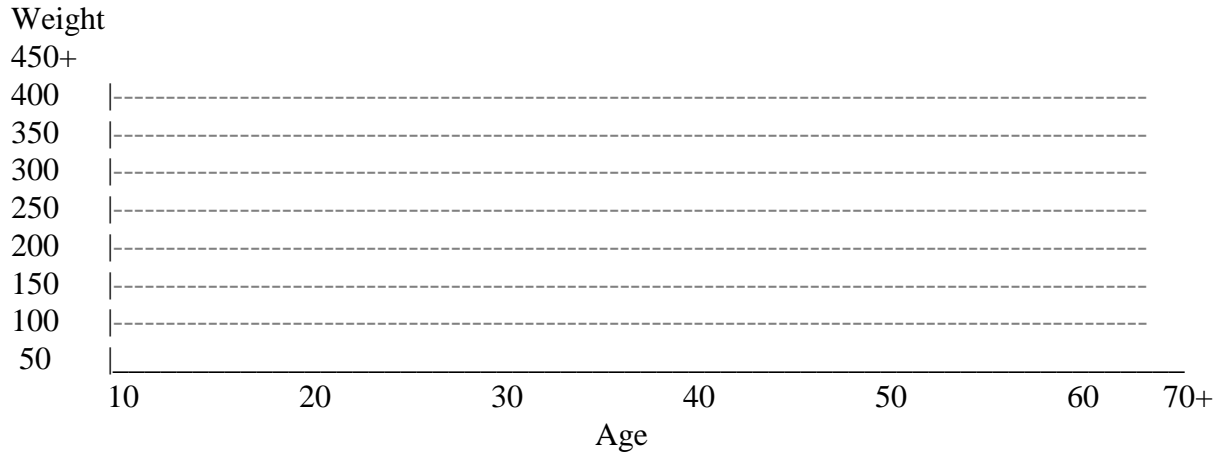


## Body Weight History Form

Thank you for taking the time to fill out this short form. It will help us to determine how to serve you. On the graph below draw a line indicating your weight over your life.

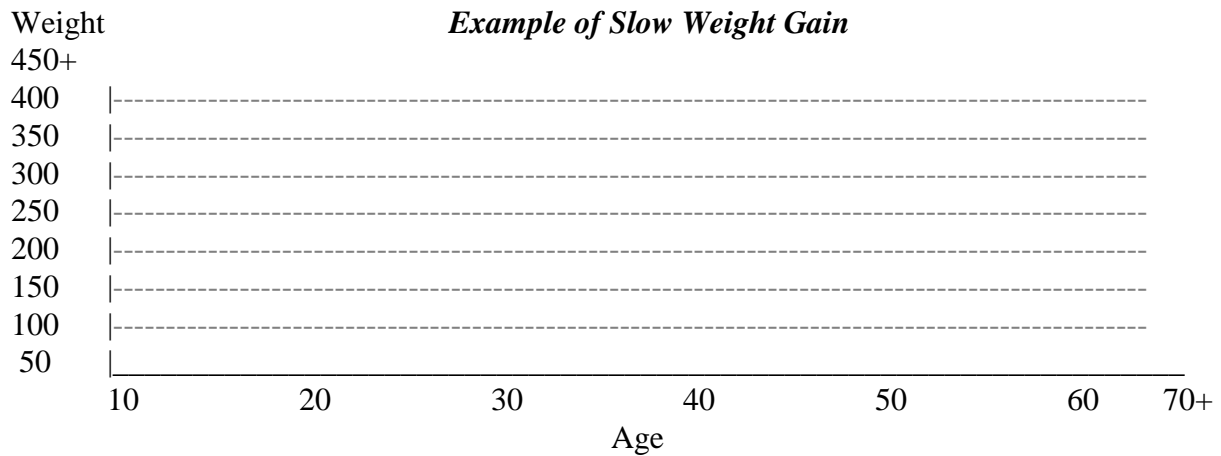
---

### *Example of maintaining weight*



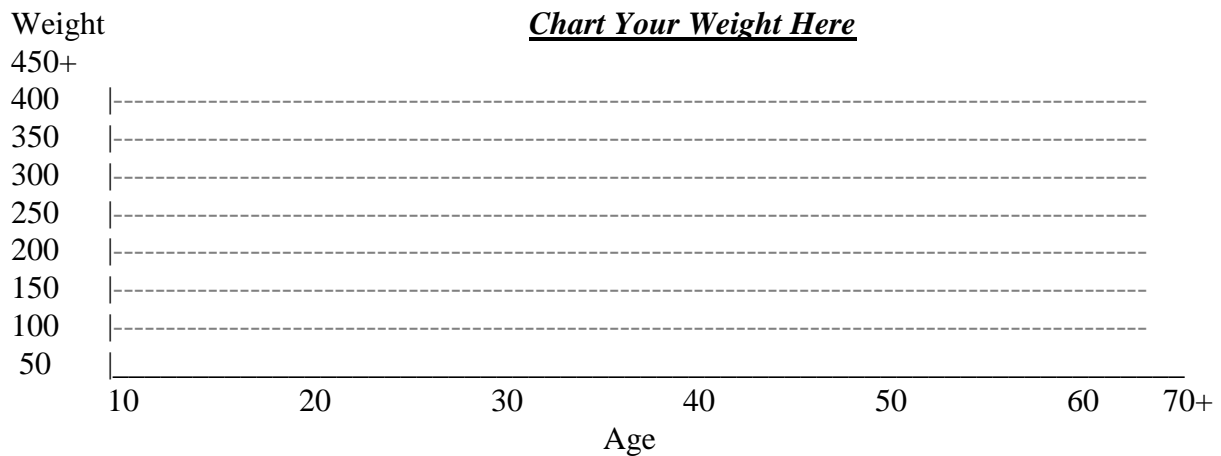
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### *Example of Slow Weight Gain*



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### *Chart Your Weight Here*



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Client Name \_\_\_\_\_ Date \_\_\_\_\_