



Join the newest FREE social fitness networking program!

When it comes to making healthy lifestyle changes, having someone for support and to help you stay on track can make all the difference! This is the philosophy behind our Workout Buddy program. By joining this social fitness network, you will be given up to 3 names of people who match most closely to your demographics, fitness level, and lifestyle. Your Buddies will be determined by using 11 criteria to find your best matches. Buddies will help each other set fitness goals and then work together to achieve them while offering each other inspiration, motivation, and support!

The Wellness Program is offering Workout Buddy to all WVU Healthcare employees. Once 50 entries have been received, we will begin the matching process. When up to 3 matches have been established, we will provide you with the name, phone number, and e-mail address of each match so you can get in touch with them. *ALL other information found on the registration form will be kept confidential by The Wellness Program.* Remember, honesty while completing the matching criteria will lead to the best matches and hopefully a successful partnership.

We hope that you are as excited about this NEW FREE (5 Wellness Points) program as we are! This could be the opportunity and kick start that you need to lead a more active and healthy lifestyle. To join Workout Buddy, please visit www.hsc.wvu.edu/Wellness for registration info and additional program details!



Registration Form

Please complete this form and bring it to The Wellness Program office (on the 8th floor of HSC South) anytime between 8:30 a.m. and 4:30 p.m., beginning October 4. You may also mail your form to us at Box 9146 or fax it to 293-3725.

QUESTIONS? Call The Wellness Program at 293-2520!

Your Name: _____

Department: _____ P.O. Box: _____

Phone: _____ Email: _____

Matching Criteria

Gender: M F Age: _____ Height: _____ Weight: _____

Current Fitness Level*: 1 2 3 4 5 Preferred Buddy: Male Female Either

Interest: Cardio Strength Training Both Time commitment (hrs/wk): _____

Time of Day: Morning Afternoon Evening Location: Fitness Center Outdoors

Relationship Status: Single In A Relationship

*Current fitness level 1= beginner, 5= advanced/athlete. REMINDER: Only your name, phone number, and e-mail address will be given to your match. ALL other information found on the registration form will be kept confidential by The Wellness Program.

Wellness Points

Do you avoid all forms of tobacco? YES NO

*If No, would you like information on being tobacco free? YES NO

Do you wear your seat belt (helmet if riding a motorcycle) at all times? YES NO



This Section Will Be Completed By The Wellness Program Staff!

Buddy Match 1: _____ Date: _____

Buddy Match 2: _____ Date: _____

Buddy Match 3: _____ Date: _____