

# Complete Game Evaluation

## What Can a Better Game Do for YOU?

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## Contact Information

Name\_\_\_\_\_

Home Phone\_\_\_\_\_ Cell Phone\_\_\_\_\_

E-mail\_\_\_\_\_

Would you like to sign up for our newsletter? Yes No

Age\_\_\_\_\_ Occupation/Area of Study\_\_\_\_\_

Prior Athletic Experiences:\_\_\_\_\_

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## Your Game and Goals

Years Playing Golf\_\_\_\_\_

How often do you play golf?\_\_\_\_\_

Best score ever\_\_\_\_\_ Current Handicap\_\_\_\_\_

Current scoring range (low-high)\_\_\_\_\_

Golf: Right / Left Handed \_\_\_\_\_

Dominant Hand: Right / Left \_\_\_\_\_

Why do you play golf – what do you enjoy about the game, etc.?

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## What are your golfing goals?

Immediate: This Lesson\_\_\_\_\_

Short term: Now to 3 months\_\_\_\_\_

Mid term: 3 to 6 months \_\_\_\_\_

Long term: 12months \_\_\_\_\_

**Action plan for achieving your goals:**

**Process Goals?** \_\_\_\_\_

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**Enabling Goals?** \_\_\_\_\_

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What is the difference between a good and bad day on the course (doesn't have to be score related)? \_\_\_\_\_

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What areas of your game do you feel like you need to improve or better understand to improve your score? \_\_\_\_\_

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Have you taken lessons before? How long ago? Was it a positive or negative experience? \_\_\_\_\_

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## Complete Game Evaluation

What Can a Better Game Do for YOU? Golf Skills Evaluation

Please rank how confident you feel about the following areas of your game

1=Not Confident 10=Extremely Confident 0 = Don't know

Putting:	1	2	3	4	5	6	7	8	9	10
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Chipping:	1	2	3	4	5	6	7	8	9	10
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Pitching:	1	2	3	4	5	6	7	8	9	10
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Greenside Bunker:	1	2	3	4	5	6	7	8	9	10
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Fairway Bunker:	1	2	3	4	5	6	7	8	9	10
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Short Irons:	1	2	3	4	5	6	7	8	9	10
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Mid Irons:	1	2	3	4	5	6	7	8	9	10
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Long Irons:	1	2	3	4	5	6	7	8	9	10
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Hybrids:	1	2	3	4	5	6	7	8	9	10
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Fwy Woods:	1	2	3	4	5	6	7	8	9	10
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Driver:	1	2	3	4	5	6	7	8	9	10
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Typical Missed Shot (circle all that apply):	Pull	Push	Slice	Hook	Duff/ Fat shot	Thin shot / Topped shot / Home run
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## Practice

How often do you currently practice? \_\_\_\_\_

What does a typical practice session look like? \_\_\_\_\_

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How much time can you dedicate to practice in a week? \_\_\_\_\_

Do you ever practice on the golf course (goal to improve/learn rather than score)? \_\_\_\_\_

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## Golf Clubs

Have your golf clubs been fitted for you? If so, how long ago? \_\_\_\_\_

Are you interested in purchasing any new clubs? \_\_\_\_\_

Do you have any gaps in your yardages? \_\_\_\_\_

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## Course Management

Do have a strategy when you play a round of golf? If so what is it based on?

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Do you know exactly how far your clubs go? \_\_\_\_\_

Do you struggle making decisions on the golf course? \_\_\_\_\_

What is your best distance(s)/club(s) to approach the green (never-miss distance)? \_\_\_\_\_

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What is the hardest distance(s)/clubs(s) to approach the green (dreaded distance)? \_\_\_\_\_

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Do you have a pre-shot routine? If so, describe \_\_\_\_\_

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Do you have a pre-round routine? If so, describe \_\_\_\_\_

Do you prefer to take an aggressive or conservative approach to playing? \_\_\_\_\_

Do you change your strategy on the course based on how you are playing that day? \_\_\_\_\_

## **Shot Variables**

Do you understand how the following can affect your shot? Answer Yes or No and include any comments you have

Type of grass/lie of ball? Yes No \_\_\_\_\_

Uneven lies? Yes No \_\_\_\_\_

Weather – wind, rain, cold? Yes No \_\_\_\_\_

Do you know how to control your shot shape and/or trajectory? Yes No \_\_\_\_\_

Do you often play in other areas of the country (i.e. winter/summer overseas)? Yes No \_\_\_\_\_

Do you play in inclement weather or are you a fair weather golfer? \_\_\_\_\_

## **Rules/Etiquette**

How well do you understand the rules/etiquette of golf? \_\_\_\_\_

Would you like more information on rules/etiquette? If so please give examples...

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## Social Aspects of Golf

Do you struggle with playing with people of certain personalities (i.e. Talkative, angry, slow, intense, etc)? \_\_\_\_\_

Do you need suggestions finding places to play – leagues, tournaments, etc.? \_\_\_\_\_

## Nutrition

What do you generally eat during a round of golf? How much/often? \_\_\_\_\_

What do you generally drink during a round of golf? How much/often? \_\_\_\_\_

What do you eat/drink prior to your round of golf? \_\_\_\_\_

## Emotional Game/Personal Well Being

When do you feel stress/anxiety/fear on the golf course? \_\_\_\_\_

What causes you the most stress/anxiety/fear on the golf course? \_\_\_\_\_

How do you currently deal with stress/anxiety/fear on the golf course? \_\_\_\_\_

Have you suffered any major life changes or stressful events in your life recently? \_\_\_\_\_

Are you interested in simple techniques to help deal with stress/anxiety on and off the course? \_\_\_\_\_

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## Your Body/Fitness

Do you currently work out, stretch, or participate in any physical activities or athletics? \_\_\_\_\_

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Do you wear glasses? If so, what type? \_\_\_\_\_

Which eye is your dominant eye? \_\_\_\_\_

## Physical challenges –

Please list and describe any past or present tightness, stiffness, aches, pain, injuries, or surgeries.

Neck/Head: \_\_\_\_\_

Shoulders/Arms: \_\_\_\_\_

Wrists/Hands: \_\_\_\_\_

Back: \_\_\_\_\_

Hips/Knees: \_\_\_\_\_

Calves/Ankles/Feet: \_\_\_\_\_

**Other medical concerns** (diabetes, fibromyalgia, heart problems, ADHD, etc): \_\_\_\_\_

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Thank you for taking the time to complete my in-depth golf evaluation! Amazingly enough, each and every question in this survey contributes to your performance on the golf course. It is from my experiences in helping players to improve that I have discovered that these aspects can help or hinder your performance. If you feel that there is anything I have not covered or anything you would like to talk about in your lessons, please list it below.

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