

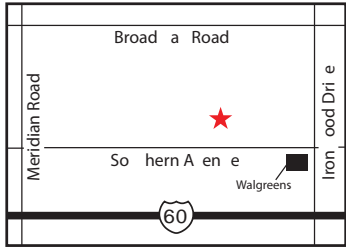
Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_

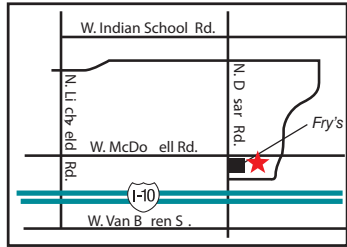
Height: \_\_\_\_\_ Weight: \_\_\_\_\_

% Body Fat (optional): \_\_\_\_\_ Pulse: \_\_\_\_\_

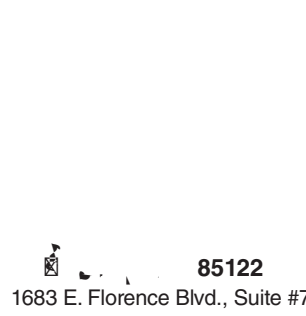
BP: \_\_\_\_ / \_\_\_\_ ( ET BT 10 \_ / \_\_\_\_ ( ET BT 10 \_ / \_\_\_\_ ( \_ / \_\_\_\_ )ID



**A** **85120**  
2080 West Southern Ave., Suite #A1

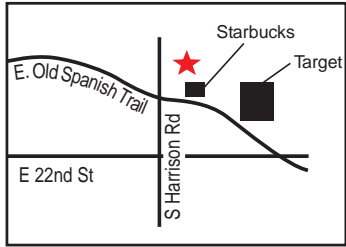



**A** **85392**  
13075 W. McDowell Rd., Suite #D106



**A** **85122**  
1683 E. Florence Blvd., Suite #7

▶ 1111



 **85748**  
9525 E. Old Spanish Trail, Suite #101



**Y** **85364**  
1394 W. 16th Street