



## Manual Submission Amazing Transformation

### Personal Information

First Name:

Last Name:

Date of Birth:

Gender:

Phone:

Country:

City:

State/Province:

Clinic Name:

Other Clinic Name:

Coach's Name:

Coach's Last Name:

Before Information: lbs

After Information: lbs

Youtube/Vimeo/URL:

Your Story:

How was your weight loss journey?

Your Transformation:

What do you enjoy the most now that you've lost the weight?

As your Signature Statement, please complete the following sentence: I'm proud that I committed to my Amazing Transformation because: