Personal Health Behavior Contract

Based on an awareness of my personal health status, I, __________________________, have decided to set the following health behavior improvement goal, and I will strive to achieve this between the following dates, __________________________.

My health behavior goal is ________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________

The advantages to me for achieving this goal are _____________
_______________________________________________________
_______________________________________________________
_______________________________________________________

The difficulties for me in doing this are _____________________
_______________________________________________________
_______________________________________________________
_______________________________________________________

The ways that I will try to accomplish this health behavior improvement goal are __________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________

If I have achieved this health behavior improvement goal by ________________, I will reward myself by ________________
_______________________________________________________
_______________________________________________________

If I fail to achieve this health behavior improvement goal, I will forfeit this reward.

Signed: ________________________________________________
I, ________________________________________________, have reviewed this contract and I agree to discuss the experience involved in accomplishing or not accomplishing this health behavior improvement with ______________________ on ________________________________.

Signed (witness): ________________________________________
Phone number/email: _________________________________