

## Lifestyle Questionnaire

Name (Please Print)					
Please list any food	allergies or dietary restrict	ions you may h	ave		
Who does the most	cooking?	Who does t	he clean up most? _		
1) In your daily mea	l planning, please number	the 3 most imp	ortant items (1 being	g most important)	
Nutrition	Speed	Clean Up		Flavor	
Cost	Variety	Presentation		Quantity	
2) Please circle if yo	ou have family history of an	y of the health	issues below.		
Heart Disease	High Cholesterol	Cancer	Alzheimer's	Colitis	
Diabetes	High Blood Pressure	Stroke	Obesity	Acid Reflux	
3) Are you trying to	eat healthier? YES	NO			
4) Do you find it diff	l) Do you find it difficult to get your children to eat healthy? YES NO N/A				
5) What kind of coo	kware, bakeware, and ser	veware do you	presently use? Pleas	se circle below.	
Stainless Steel	Aluminum/Anodized	Aluminum	Teflon Coated	Cast Iron	
Сор	per Waterless	Cookware	Porcelain or Er	namel	
	he lowest price, highest q				
7) ii you were impre	essed, would you recomme	ena us to your t	aminy and mends? _	YES N	





## Who is hungry? Let's talk about today's menu!

Today's Menu	Regular Method	SALADMASTER	% Savings
Chicken Thighs			
Oil For Chicken			
Cake			
Oil For Cake			

<b></b>	How long would it take you to cook all of these for 6 adults if you were making them from scratch?

Total time to prepare & serve the meal?		

Please Circle Weekly Grocery Cost	Monthly Cost	10%-20% Savings	Yearly Savings	10 Year Savings
\$50	\$200	\$20 - \$40	\$240 - \$480	\$2,400 - \$4,800
\$100	\$400	\$40 - \$80	\$480 - \$960	\$4,800 - \$9,600
\$150	\$600	\$ 60 - \$120	\$720 - \$1,440	\$7,200 - \$14,400
\$200	\$800	\$80 - \$160	\$960 - \$1,920	\$9,600 - \$19,200
\$250	\$1,000	\$100 - \$200	\$1,200 - \$2,400	\$12,000 - \$24,000