

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: _____