



Nutrition Consulting

Nutrition consulting can strengthen your food knowledge, support your daily lifestyle, dispel common nutrition myths, and promote health. Our on-campus nutrition professional, Sylvia Emmorey can consult with you on the following topics, including, but not limited to:

- Weight gain
- Weight loss
- Assessing your current diet
- Healthy eating
- Alternative diets
- Digestive disorders
- Muscle gain
- Uncontrolled weight loss
- Skin conditions
- Diabetes
- Supplements

Each client is assessed uniquely in a 30-minute virtual appointment.

Sylvia Emmorey is a Registered Holistic Nutritionist (RHN), Registered Nutritional Consulting Practitioner (RNCP) and Registered Orthomolecular Health Practitioner (ROHP)

Nutrition Consulting fees for DC and Ontario Tech students, staff and faculty are \$25 for one 30-minute virtual nutrition consultation payable online at <https://registercrwc.dc-uoit.ca>.

Nutrition Consulting FAQs

- **Is there anything about nutrition consulting online I can review?**
 - Please visit the "[Nutrition Consulting](#)" page for more information and details on consulting at the Flex.
- **How do I purchase a session?**
 - Purchases for all virtual nutrition consultations are made online at <https://registercrwc.dc-uoit.ca>.
 - Navigate to the "[Fitness Services](#)" tab to select and purchase Nutrition Consulting with Sylvia Emmorey.
 - Once you have purchased for your session, email the Fitness Coordinator, Brianna Christopher (brianna.christopher@durhamcollege.ca), stating you have purchased a nutrition consultation.
 - Brianna will then confirm your purchase and connect you with Sylvia by email so the two of you may set up your virtual nutrition consultation.
- **Do I need to fill out any forms?**
 - Yes ☺ Each client will be asked to complete a food journal and health history form. Both will be emailed to you by Brianna.
- **Is there a deadline for me to use my nutrition consulting session(s)?**
 - Yes. Sessions must be used within 2 months of the purchase date.
- **What if I can't make my scheduled session?**
 - The Flex follows the industry standard 24-hour cancellation policy. Thank you for providing Sylvia a minimum of 24 hours notice to reschedule an appointment in order you are not charged for a session you did not attend.
- **What if I can't use my session? Am I able to request a refund?**
 - We realize that life happens and in rare cases clients may be unable to use purchased nutrition consulting sessions. A request for refund must be submitted through Brianna. Approved refunds may be provided within 2 months of purchase date.

For further information regarding nutrition consulting, please visit the [Campus Recreation](#) website or connect with Fitness Coordinator, Brianna Christopher, 905.721.2000 ext. 2100, brianna.christopher@durhamcollege.ca

CAMPUS RECREATION

DURHAM COLLEGE & ONTARIO TECH UNIVERSITY

Client Health History

Please contact fitnesservices@dc-ot.ca if you require assistance to complete.

Client Information:

Date (yyyy-mm-dd):

First Name:

Last Name:

Middle Initial:

Birth Date (yyyy-mm-dd):

Age:

Email Address:

Address:

City:

Telephone Number:

Please indicate:

Occupation:

Get Active Questionnaire Submitted?

In order, please list your top 3 personal health and fitness objectives

- 1.
- 2.
- 3.

Training Status:

1. Are you currently physically active?
2. How often do you exercise each week?
3. What exercise do you enjoy?

Workouts/week

Walking	Swimming	Group Exercise
Tennis	Cycling	Jogging
Indoor cycling	Running	Weight training
Yoga	Other:	

Existing Medical Conditions – Please check the appropriate conditions

Diabetes	Pregnancy	Asthma
Heart Condition	Arthritis	Obesity
Epilepsy	Cholesterol	Hernia
Eye problems	Hearing Loss	Blood Pressure
Fainting, dizziness, balance		Pulmonary/lung issues
Other:		

Medications

Are you currently taking any medications?

If yes, please list the medication and the condition it treats

Medication: Condition:

Medication: Condition:

Medication: Condition:

Past/Current Injuries

Neck	Shoulder R	L	Hip R	L
Upper Back	Lower Back		Knee R	L
Wrist R L	Ankle R L		Elbow R	L

Lifestyle

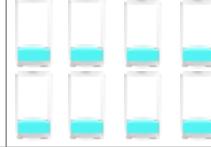
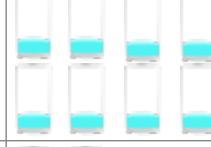
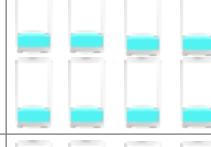
1. Rate your stress on a daily basis:
2. How much sleep do you average each night? Hours/night
3. Do you smoke?
4. Alcohol Consumption:

Nutritional Habits

- | | Ideal Weight: |
|--|---------------|
| 1. Current weight: | |
| 2. BMI: | |
| 3. Do you follow a special diet? | |
| 4. How would you rate your eating habits? | |
| 5. Is weight loss one of your primary goals? | |
| 6. My typical breakfast consists of: | |
| 7. My typical mid-morning snack consists of: | |
| 8. My typical lunch consists of: | |
| 9. My typical mid-afternoon snack consists of: | |
| 10. My typical dinner consists of: | |

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Food Journal for: _____ Week of: _____

	Breakfast	Snack	Lunch	Snack	Dinner	Notes	Cups of Water
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							