

Your Transformation Worksheet

1. Reflect on your beliefs and perceptions about health, symptoms, and power over your own life. Write three perceptions.

1. _____

2. _____

3. _____

2. Which water tasted the best to you?

3. Which one energized you?

4. What are your current beliefs about food?



Nutrition

1. What is your relationship to food?

2. What does sugar do for you?

3. What does caffeine do for you?

4. What cravings do you have?

5. What have you always believed about fats?



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6. What is your biggest challenge with food?

7. After your meal, what is different from what you normally eat?

8. How do you feel?

9. What did you notice?



Hydration

1. Do you remember that you said you felt _____ and that you liked the _____ water?
2. How much water are you drinking per day?

3. How can you fit in the amount of water you need on the daily basis?

Detoxification

1. Do you detox on a regular basis?

2. You now understand that we don't have to tell the body to detoxify, but we do have to care for our bodies so that natural function happens in the way it's intended. How can you do this daily?

3. Look at the Bristol Stool Chart. How are you doing?

4. How can you help your organs of elimination to naturally detoxify?



5. How can you apply this information to your daily routine?

Battery Test

1. How is your charge right now?

2. What do you look like when you're green vs. red?

Rest

3. Do you have difficulty sleeping? Or staying asleep?

4. What's going on in your life?

5. Possible conflict activity?



6. How many hours of uninterrupted sleep do you get every night?

Stretch

1. How is energy on a scale of 1-10?

10 - Minute Meditation

2. What is your energy now on a scale of 1-10?

3. Do you think listening to a guided meditation in the evening would be helpful?

4. What other strategies sound appealing to you?

5. Do you consider yourself a busy person?

6. While going through the 48 Day Transformation how can you adjust your schedule to put taking care of yourself first?



7. Write three things you are grateful for from the last several days.

1. _____
2. _____
3. _____

After Gratitude Exercise

1. What is your energy now?

Faith

READ FIRST SEVERAL PARAGRAPHS ON PAGE 50!

Faith is individual, but the faith I am talking about here is the faith in the body to naturally heal.

1. In what ways can you increase your faith in natural healing?

Exercise – Sunshine

1. Resting heart rate _____

2. How do you feel now?

3. After activity heart rate _____

4. Did your heart rate raise?



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5. Do you want to lose weight? _____
6. Maintain the ideal weight for you? _____
7. Will you feel better about your appearance? _____
8. What are some forms of exercise you love?

During the 48 days aim for 30 minutes a day, minimum.

9. Think of your schedule, where can you put your 30 minutes?

Sunshine/Grounding

1. How many of the 7 Laws do you already do every day?

2. Which one was your favorite?

3. What is your greatest challenge?



Let's Get Started

REVIEW THE STAGES, THERE IS NO NEED TO COUNT CALORIES!

1. What can you expect on your Transformation?

2. Are you willing to expect these things in your life?

Portion Sizes – Page 106

As a good rule of thumb, a serving size equal:

Name three:

1. -----

2. -----

3. -----



At Restaurants – Eating Out Tips Page 184

Name three eating out tips.

1. _____

2. _____

3. _____

What to Eat – Pages 108- 115

1. Why are we striving for grass-fed and organic?

Stock Your Kitchen – Pages 116-117

1. Evaluate your pantry as it is now. What effort will you make in transforming your pantry?

Warming/Cooling Foods – Pages 132-137

1. What foods do you think warm the body?



2. What foods cool the body?

Supplements – Page 88-104

There are two types of supplementation.

1. What are they?

2. Give a short definition of your understanding.

3. Write down any questions you may have regarding supplementation.

Daily Routine – Pages 80-87

1. What is your way forward?

2. Create action plan that feels right to you and for your lifestyle.



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Write at least three ideas under each category.

Law 1: Planning Nutrition

1. _____
2. _____
3. _____

What therapeutic services could help you with nutrition?

Law 2: Planning Hydration

1. _____
2. _____
3. _____

Law 3: Planning Detoxification

1. _____
2. _____
3. _____

What therapeutic services could you include to help detoxify naturally?

Law 4: Rest

1. _____
2. _____
3. _____



Law 5: Faith

1. _____
2. _____
3. _____

Law 6: Planning Exercise and Oxygen

1. _____
2. _____
3. _____

Law 7: Planning Sunshine and Outdoors

1. _____
2. _____
3. _____

After Creating Your Plan

1. Are you ready to commit to eating and living naturally for life?



Pop Quiz

1. Without looking - write down the 7 Laws of Wellness

Wellness is a way of life and encompasses all aspects of our lives.

Pages 119-125

Foods for Life

Healthy Occasional Foods

Foods to Avoid for Life



Questions For Teleconferences

What was the most meaningful part of this presentation?

What one thing are you committing to do differently and when will you start?

