

Race Evaluation Form

Date: _____

Event Name/Location: _____ Dist/Technique _____

Results: _____ (time) _____ (place) _____ (time/km)

Race Conditions: _____ (temp) _____ (altitude) _____ (weather)

Pre Race Prep:

Nutrition: _____

Warm up (describe) _____

Overall feeling before start:	Terrible	1	2	3	4	5	Great
Self – Confidence level:	None	1	2	3	4	5	Very High
Focus of Attention:	Drifting	1	2	3	4	5	Concentrated

What were you focusing on? _____

Race Description:

Describe Race: _____

Focus of Attention:	Drifting	1	2	3	4	5	Concentrated
Ability to Push Self:	Limited	1	2	3	4	5	Fully Extend

Anything unexpected happen? (+ve or -ve): _____

How did you cope? _____

Post Race:

Describe warmdown: _____

Nutrition: _____

Things to work on for next race (how to improve upon performance?)

PRE: _____

DURING: _____

POST: _____