

PHYSICAL ACTIVITY READINESS QUESTIONNAIRE (PAR-Q)

Enrolling in a course where you are physically active is fun and healthy. The health benefits of physical activity are well documented.

Being more active is very safe for most people; however the Academy 4 Wellbeing has a duty of care for all Clients. For your safety we require you to complete our PAR-Q form. Please answer the questions below as accurately as possible.

ABOUT YOUR HEALTH HISTORY

Question	Yes	No
1 Are you currently under a doctor's care for a heart condition?	<input type="checkbox"/>	<input type="checkbox"/>
2 Have you ever been breathless, dizzy or had chest pain whilst engaging in physical activity?	<input type="checkbox"/>	<input type="checkbox"/>
3 Is your doctor currently prescribing medicine for your blood pressure or heart condition?	<input type="checkbox"/>	<input type="checkbox"/>
4 Do you have a bone or joint problem that could be made worse by your participation in your course?	<input type="checkbox"/>	<input type="checkbox"/>
5 Do you suffer from any illness that the Academy 4 Wellbeing should be aware of in order to assist you in an emergency?	<input type="checkbox"/>	<input type="checkbox"/>
6 Do you know of any other reason why you should not participate in physical activity?	<input type="checkbox"/>	<input type="checkbox"/>
7 If you are enrolling into a course held on or in the water, can you swim?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered yes to any questions from 1 to 6 please provide details.

YES TO ONE OR MORE QUESTIONS? (1 TO 6)

Talk with your doctor BEFORE you start this course. Tell the doctor about the PAR-Q form and which questions you answered yes. You must disclose these details to the tutor in charge of your class. You may be able to do the activity you want - as long as you start slowly and build up gradually.

I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction.

NAME

SIGNATURE

DATE