

Fit 4 Life

Physical Activity Readiness Questionnaire (PAR-Q)

Many health benefits are associated with regular exercise and the completion of a PAR-Q is a sensible first step to take if you are planning to increase the amount of physical activity in your life.

For most people, physical activity should not pose any problems or hazard. The PAR-Q has been designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice regarding the type of activity most suitable for them.

Common sense is your best guide in answering these few questions. Please read the following questions carefully and check **YES** or **No** below the question if it applies to you.

Has a Doctor or medical professional ever told you that you have high blood pressure?			Do you suffer from a bad back or have any problems with your joints?
	YES	No	YES NO
Have you ever had any abdominal problems such as post hernias, muscle tears or any operations in			Are you aware of any heart problems?
the abdominal region?	YES	No	YES No
Do you suffer from any form of respiratory disorder such as Asthma or COPD that affects			Are you or do you suspect that you may be pregnant at this time, or have you given birth within the last 6 months?
your activity ability?	YES	No	YES No
Do you suffer from either of the	following?	?:	Do you lose your balance, suffer from dizziness of ever lost consciousness?
Epilepsy	YES	No	YES No
Diabetes	YES	No	Are you currently taking medication?
Do you get swollen ankles?	YES	No	YES No
If you answered YES to any of the think is relevant to this induction			h to add anything else in regards to your health you w:
Signed:			Print name:

If you answered **NO** to all questions above, it gives a general indication that you may participate in physical and aerobic fitness activities and/or fitness evaluation testing. The fact that you answered **NO** to the above questions is no guarantee that you will have a normal response to exercise.

If you answered YES to any of the above questions, then you may need written permission from a doctor before participating in physical and aerobic fitness activities.



General Health & Safety Advice

Check machines are in full working order. Always adjust seats whilst standing. Check weights and adjust before use. Ensure correct technique as demonstrated by instructor. If unsure, stop and ask for assistance.

Patient/Customer

The answers I have given in the PAR-Q overleaf are correct to the best of my knowledge and I consent to taking part in exercise. I am fully aware of the risks involved in taking part in an exercise programme and confirm that the programme has been fully explained to me. If any of my medical conditions change I will consult with a member of the exercise team.

I understand that during my induction I have been shown a select amount of exercise equipment. If I wish to add new exercises to my programme or require a reminder of correct usage, I am aware I must seek the advice of the exercise professionals for a full demonstration on safe and correct usage.

Signed:			Print Name:	Date:	_		
May we contact you in the following ways?							
Phone:	Yes	No	Number:		_		
Text message:	Yes 🗌	No 🗌	Number:		_		
Email:	Yes 🗌	No 🗌	EMail:		_		
Exercise Professional							
I have fully explained the exercise programme to							
and am satisfied that he/she complies with the criteria to exercise.							

Signed:			Print Name:	Date:
May we contact y	ou in the foll	owing ways	?	
Phone:	Yes	No 🗌	Number:	
Text message:	Yes 🗌	No 🗌	Number:	
Email:	Yes 🗌	No	EMail:	
Exercise Professio	onal			
			me to	
and am satisfied t	hat he/she cc	mplies with	the criteria to exercise.	

Print Name: Signed: Date:



Physical Activity Readiness Questionnaire (PAR-Q) continued