

**Personal details**

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| Name: | Contact number: |
| Date of birth: | Email address: |
| Occupation: | Address: |
| GP Name/Practice: | Post code: |

Many health benefits are associated with regular exercise, and the completion of 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 problem or hazard. PAR-Q is designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them. Common sense is the best guide in answering these few questions.

1. Have you ever been diagnosed with bone or joint problems, such as arthritis or osteoporosis that has been aggravated by exercise or might be made worse with exercise? YES / NO
2. Do you have high/low blood pressure? YES / NO
3. Have you been diagnosed with a heart/cardiovascular condition? YES / NO
4. Is there any history of Coronary Heart Disease in your family? YES / NO
5. Have you ever felt pain in your chest when you do physical exercise? YES / NO
6. Do you have Diabetes or any other metabolic disease? YES / NO
7. Has your doctor ever said you have raised cholesterol (serum level above 6.2mmol/L)? YES / NO
8. Is your doctor currently prescribing you medication? YES / NO
9. Have you ever suffered from unusual shortness of breath at rest or with mild exertion? YES / NO
10. Do you often feel faint, have spells of severe dizziness or have lost consciousness? YES/NO
11. Have you been diagnosed with Epilepsy? YES/NO
12. Have you recently had surgery? YES/NO
13. Do you currently drink more than the average amount of alcohol per week (21 units for men and 14 units for women)? YES / NO
14. Do you currently smoke? YES / NO
15. Do you currently exercise on a regular basis (at least 3 times a week)? YES/NO
16. Do you work in a job that is physically demanding? YES / NO
17. Are you, or is there any possibility that you might be pregnant? YES / NO

16.Do you know of any other reason why you should not participate in a physical activity programme? YES/NO

If you answered YES to any of the questions above please give details:

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If you answered YES to one or more questions: If you have not recently done so, consult with your doctor by telephone or in person before increasing your physical activity and/or taking a fitness appraisal. Tell your doctor what questions you answered ‘yes’ to on PAR-Q or present your PAR-Q copy. After medical evaluation, seek advice from your doctor as to your suitability for:

1. Unrestricted physical activity starting off easily and progressing gradually, and
2. Restricted or supervised activity to meet your specific needs, at least on an initial basis

If you answered NO to all questions: If you answered PAR-Q accurately, you have reasonable assurance of your present suitability for:

1. A graduated exercise programme
2. A fitness appraisal

Assumption of Risk

I hereby state that I have read, understood and answered honestly the questions above. I also state that I wish to participate in activities, which may include aerobic exercise, resistance exercise and stretching. I realise that my participation in these activities involves the risk of injury and even the possibility of death. Furthermore, I hereby confirm that I am voluntarily engaging in an acceptable level of exercise, which has been recommended to me.

Clients Signature: Date:

Trainers Name:

Trainers Signature: Date: