



**PHYSICAL HEALTH
PERSONAL TRAINING**
www.phpt.co.uk

Sabrina Severo Forno

Holistic Exercise Specialist

Consulting at your home or office at your own convenience. Edinburgh.

0131 620 0396 / 0792 220 2968

Physical Activity Readiness Questionnaire (PAR-Q) and You

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly:

Check YES or NO:

YES NO

- 1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?
- 2. Do you feel pain in your chest when you do physical activity?
- 3. In the past month, have you had chest pain when you were not doing physical activity?
- 4. Do you lose your balance because of dizziness or do you ever lose consciousness?
- 5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?
- 6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
- 7. Do you know of any other reason why you should not do physical activity?

If you have answered Yes to one or more questions:

Talk to your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

You may be able to do any activity you want – as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.

Find out which community programs are safe and helpful for you.

No to all questions:

If you answered NO honestly to all PAR-Q questions, you can be reasonably sure that you can:

Start becoming much more physically active – begin slowly and build up gradually. This is the safest and easiest way to go.

Take part in a fitness appraisal – this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively.

Delay becoming much more active:

If you are not feeling well because of a temporary illness such as a cold or a fever – wait until you feel better; or

If you are or may be pregnant – talk to your doctor before you start becoming more active.

Please note: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan.

Informed use of the PAR-Q: Reprinted from ACSM's Health/Fitness Facility Standards and Guidelines, 1997 by American College of Sports Medicine



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HEALTH QUESTIONNAIRE

Date: _____

Name:	
Address:	
Telephone:	
Email:	
Occupation:	Age:

Current illness/disease:

Current or recurring injury:

Medication:

Back/Knee/Joint problems:

Pregnant: YES NO

Post partum _____ months
(If so, indicate type of birth) _____

Have you ever suffered from the following problems? :

Heart condition..... High Blood pressure.....

Low blood pressure..... Epilepsy.....

Diabetes..... Schizophrenia.....

Feint/dizziness..... High Cholesterol.....

Angina..... Other.....

Do you currently exercise?

Informed Consent: I hereby consent to take part in Fitness Pilates at my own risk. If I have any known health problems I will discuss them with Sabrina Forno. If she offers any reason for not joining in this exercise programme I will adhere to her recommendations. I understand that the risks of undertaking physical activity and exercise may include disorders of heartbeats, abnormal blood pressure response, and, very rarely, a heart attack or death. I further understand that selection and supervision of exercise is a matter of professional judgement. I understand that I can withdraw my consent or discontinue participation in any aspect of the fitness programme at any time without penalty or prejudice towards me. I have read the statement above and have had all of my questions answered to my satisfaction.

Print Name:

Signature:



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Fitness Pilates Class

Day: _____ **Time:** _____ **Venue:** Salvation Army Hall
Block Booking from: _____ **to:** _____

CLASS PARTICIPANT INFORMATION

PERSONAL INFORMATION	
NAME	
TELEPHONE NUMBERS	
E-MAIL ADDRESS	
ADDRESS	
AGE	

MEDICAL INFORMATION	
ILLNESS/ INJURY	DETAILS

TRAINING HISTORY	
PREVIOUS TRAINING	
CURRENT TRAINING	
DAILY WALKING	
LIKES/ DISLIKES	

LIFESTYLE FACTORS

OCCUPATION	
HOURS SPENT AT WORK	
HOURS SLEPT PER NIGHT	
CURRENT STRESS LEVEL	
SMOKING	

DIET INFORMATION	
WATER	
TEA/COFFEE	
ALCOHOL	
FRUIT/ VEG	
CHOCOLATE/ CRISPS	
SUPPLEMENTS	

GOALS in Fitness Pilates Classes	
GOAL 1	
GOAL 2	
GOAL 3	