

## Physical Activity Readiness Questionnaire (PAR-Q)

This PAR-Q is designed to help you to help yourself. Many benefits are associated with regular exercise, and completion of the PAR-Q form 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 a problem or hazard.

The PAR-Q has been designed to identify the small number of people for whom physical activity might be inappropriate or for those who should seek medical advice concerning the type of activity most suitable for them. Common sense is your best guide for answering these questions.

1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?	YES/NO
2. Do you feel pain in your chest when you do physical activity?	YES/NO
3. In the past month, have you had chest pain when you were not doing physical activity?	YES/NO
4. Do you lose your balance because of dizziness or do you ever lose consciousness?	YES/NO
5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in physical activity?	YES/NO
6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?	YES/NO
7. Do you know of any other reason why you should not do physical activity?	YES/NO

If you have answered YES to any of the above questions, then it is important that you gain consent from your doctor before participating in the group exercise to music session.

If you have answered NO to all of the above questions and you have reasonable assurance of your suitability for a group exercise to music sessionyoucan participate in the group exercise to music session—which will include: a warm-up, a main component (consisting of cardiovascular and muscular strength and endurance exercises) and cool down with stretches.

You are advised to postpone entry into the programme if you feel unwell or have a temporary illness. You must inform your instructor of any changes to your health status, whilst engaged in your exercise sessions.

Please note that no liability is accepted for any loss of or damage to any articles, which you may bring with you to classes. Equally, liability is not accepted for loss of or damage to motor vehicles or their contents and these are left at the owner's risk.

"I confirm that where any medical condition, discomfort or injury which may be affected by physical activity applies or becomes applicable at any time when I am participating in a class, I am responsible for checking with my doctor to ensure I am able to participate in this activity."

Client's signature:	Date:	
Print Name:	Address:	
Email:	Post Code:	
Contact number:	Gender: Age:	
Emergency Contact Name (please print):	Emergency Contact Telephone Number:	
Email address:		