



## Physical Activity Readiness Questionnaire (PAR-Q) - Student

Name \_\_\_\_\_ Tutor Group \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Person to be contacted in case of emergency  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Doctors Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Doctors Address \_\_\_\_\_

### Medical History

Do you get chest pains either at rest or after exercise? Yes / No

Do you get out of breath at rest or after slight exertion? Yes / No

Do you often get headaches, dizziness or fainting spells? Yes / No

Has your Doctor ever said that you have a heart condition? Yes / No

Do you regularly take drugs or medicines? Yes / No

Do you get pain or have limited movements in any joints? Yes / No

Are you pregnant? Yes / No

Are you aware of any medical condition not mentioned above  
that may affect your ability to exercise Yes / No

Is there any other information which you think may be useful/relevant? Yes / No

**If you have answered yes to any of the above questions please give further details below:**

*The information given above is to the best of my knowledge a true and accurate record.*

Student signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Carer signature \_\_\_\_\_ Date \_\_\_\_\_

### **FITNESS SUITE INDUCTION – To be completed by a trained member of staff**

Your induction has been carried out by \_\_\_\_\_ Date \_\_\_\_\_

Doctor Consent required \_\_\_\_\_ Date \_\_\_\_\_

*I have fully understood the information given to me at the time of my induction and I agree to follow all the rules of the fitness suite as detailed overleaf and displayed in the fitness suite. I understand I will not try to use any equipment in the fitness suite unless I have been fully instructed in its safe use. I agree to follow any advice given to me regarding any medical condition or disability. Should my condition change for any reason, I will inform you and will not continue to exercise until you give consent.*

Signed \_\_\_\_\_ Date \_\_\_\_\_

## Rules of the Fitness Suite for Students

**Please follow these guidelines to ensure the fitness suite is as safe an environment as possible.**

- Only train when supervised by a member of staff
- Always warm up and cool down adequately
- Avoid eating a heavy meal prior to exercise
- Never drink alcohol prior to exercise
- Wear suitable clothing and footwear. Clothing should be loose fitting but not baggy. Footwear should be supportive
- Only use the machines for the purpose they were built for
- Never attempt to perform any exercises that have not been demonstrated by a member of staff
- Do not lean on any machines or moving parts, to avoid trapping fingers or clothing
- Please report any defects or damaged equipment to member of staff, no matter how trivial it may seem
- Do not train if you feel unwell or are injured
- Drink water regularly throughout your workout
- Do not bring mobile phones into the fitness suite
- Do not bring glass bottles into the fitness suite

**If you have any problems or queries do not hesitate to contact a member of staff**