

## Participant Readiness Questionnaire (PAR-Q)

Name:			Address:	
Contact No:				
Email:		DOB:		
Occupation:			-	
GDPR Compliance				
Please tick here to confirm you are happy for this data to be stored by bourn-fit				
Please tick here to confirm you are happy for bourn-fit to contact you via email				
Please tick here to confirm you are happy for bourn-fit to contact you via telephone				
You may ask bourn-fit to destroy any information it holds on you at any time. bourn-fit will only contact you with				
regards to classes/bookings and will not pass on your details to third parties. bourn-fit's privacy policy is available to				
view at bourn-fit.com.				
If you are b	etween the ages of 15 and 69, the PAR-Q	will tell you if you	should check with your doc	tor
before you significantly change your physical activity patterns. If you are over 69 years of age and are not				
used to being very active, check with your doctor.				
Please read each question carefully and answer honestly by indicating <b>YES</b> or <b>NO</b> .				
Has your doctor ever said you have a heart condition and that you should only do physical				YES/NO
activity recommended by your doctor?				
Do you feel pain in your chest when you do physical activity?				YES/NO
In the past month, have you had a chest pain when you were not doing physical activity?				YES/NO
Do you lose balance because of dizziness or do you ever lose consciousness?				YES/NO
Do you have a bone or joint problem (for example back, knee or hip) that could be made worse				YES/NO
by a change in your physical activity?				
Is your doctor currently prescribing medication for your blood pressure or heart condition?				YES/NO
Do you know of ANY OTHER REASON why you should not take part in physical activity?				YES/NO
If YES, please comment:				
f you answered YES to one or more questions:				
ou should consult with your doctor to clarify that it is safe for you to become physically active at this current time and in your current				
tate of health.				
f you answere	d NO to one or more questions:			
t is reasonably safe for you to participate in physical activity, gradually building up from your current ability level. A fitness appraisal can				
elp determine	your ability levels.			
Whilst every effort is made to keep sessions both safe and effective, there is a risk of injury as with any				
programme of activity. I am participating of my own free will. I hereby state that I have read, understood and				
answered th	nis pre-exercise health screening questionnain	re honestly.		
Signed:		1	Date:	
Print:				
Having anyword VCC to any of the questions shows there are the state of the control of the contr				
Having answered YES to one of the questions above, I have sought medical advice and my GP has agreed that I may exercise.				
Signed:			Date:	
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Print:		L		

NOTE: This PAR Q becomes invalid if your condition changes so that you would answer YES to any of the 7 questions.