

HEALTH QUESTIONNAIRE

All information will be treated in the strictest confidence & held securely

FULL NAME : _____

ADDRESS: _____ **POSTCODE:** _____

TEL NO (Day & Evening): _____ **MOBILE:** _____

EMAIL: _____ **DATE OF BIRTH:** _____

How regularly do you currently exercise? (please circle):

Never **Once a month** **Once a week** **More than once a week**

What are your personal aims? (eg: strengthen core, improve fitness after injury, tone up, feel fitter, move more freely, meet people etc)

Please circle for your following answers:

Are you currently taking medication?	YES	NO
Do you smoke?	YES	NO
Are you pregnant?	YES	NO
Have you given birth in the last 3 months?	YES	NO

Have you had/have any injuries, operations, serious illnesses or disabilities?

YES	NO
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Have you had or suffer from any of the following?

• Heart Condition	YES	NO
• High/Low Blood Pressure	YES	NO
• Diabetes	YES	NO
• Asthma	YES	NO
• Epilepsy	YES	NO
• Joint Problems	YES	NO

If you have circled "yes" to any of the above, please give details (below and or rear):

Please do not hesitate to ask me any questions you may have about this form.

DISCLAIMER:

You should always consult with your health professional before taking up a new exercise regime, for your complete peace of mind. Fitness Pilates caters for beginners to intermediate, with alternative options. Pilates has been recommended by Physiotherapists because of its slow moves and ability to gently exercise muscles. If at any time you experience pain during a move, stop, and return your body slowly to the neutral position. Listen to your body and work at your own level of ability and you will have an enjoyable and beneficial workout.

I believe that the above information is correct to the best of my knowledge and have read and agree with the disclaimer above:

SIGNED: _____ **DATED:** _____

[] Please tick to agree to be contacted about any class closures or latest news items

Thank you for taking the time to complete this questionnaire. Please inform me if any of the above circumstances change at any time. I trust you enjoy your workouts.
Best regards, **Liz Guillon, King'sFishers - Total Fitness Pilates** www.kingsfishers.co.uk