



Physical Activity Readiness Questionnaire (PAR-Q)

Many health benefits are associated with Yoga. The completion of PAR-Q is a sensible first step to take if you are planning on embarking on these practices.

For most people, Yoga and/or Pilates should not pose any problem or hazard. PAR-Q is designed to identify the small number of people for whom these activities might be inappropriate or those who should have medical advice before establishing a regular practice. It also enables the teacher/instructor to have some background knowledge of their client(s).

All information will be treated confidentially. Common sense is the best guide in answering these few questions.

Copies available at the studio

Name (First name only required) _____

Email _____

Postcode _____ Emergency Contact Name _____

Mobile Number _____ Emergency Contact Number _____

Date of Birth _____

Where did you find out about the studio?

Do you currently or have you within the last six months suffered from the following:

Diagnosed with a heart condition?	yes/no	Asthma?	yes/no
High blood pressure?	yes/no	Dizzy spells?	yes/no
Low blood pressure?	yes/no	Joint pains?	yes/no
Epilepsy?	yes/no		

If there is any other reason that you may not be able to partake in a class please give details here:

Have you practiced Yoga or Pilates before? yes/no

What are your goals?

Rehabilitation after injury	yes/no	Improve flexibility	yes/no
Weight loss	yes/no	Improve posture	yes/no
Detox	yes/no	Relaxation	yes/no
Tone body	yes/no	Improve fitness	yes/no
Reduce stress	yes/no		

Enrolment as a student of City Yoga Birmingham and its associates I agree to the following terms.

- I've been examined by a licensed doctor in the past 6 months and have been in good health and fully able to partake in classes at City Yoga Birmingham and associated venues.
- I have no medical condition or injury that will prevent me in participating in yoga and pilates.
- It is my responsibility to inform the yoga/pilates teacher of any changes to my health and well being.
- I accept full responsibility for any risks, conditions, injuries or damages which I might incur as a result of my participation.
- I knowingly, voluntarily and wave any claim I may have or require against City Yoga Birmingham or associates over injuries, condition or damages.
- I understand and acknowledge that City Yoga Birmingham and associates are not responsible for any loss, theft or damage to personal property left on the premises.

I have read the above agreement and fully understand the contents.

Name _____

Signature _____