

Crossfit Wollongong: PRE-EXERCISE QUESTIONNAIRE

Name (Last, First, M.I.):

DOB:

Male

Female

Address (include postcode):

Phone:

Mobile:

Email:

Emergency Contact:

MEDICAL HISTORY

(circle or give answer as necessary)

Has anyone in your family under 60 suffered from heart disease, stroke, raised cholesterol or sudden death? Yes No

Are you a male over 35 or a female over 45 and not used to regular exercise? Yes No

Have you been hospitalised recently? Yes No

Date of last medical exam:

Are you currently taking prescription medication? Yes No

Have you given birth in the last 6 weeks? Yes No

Are you or could you be pregnant? Yes No

Section A. Have you ever had or do you have any of the following:

Gout

High Blood Pressure

Stroke

Palpitations/pain in chest

Dizzy/Fainting

Epilepsy

Stomach/Duodenal Ulcer

Liver/Kidney Condition

Any Heart Condition

Diabetes type I

Diabetes type II

Rheumatic Fever

Hernia

Glandular Fever

Heart Murmur

If you have ticked any of the above questions, please take this form to your doctor and ask for a clearance to exercise before starting any exercise program, OR sign below if you have already cleared the above condition with your doctor. Please provide details of any condition and related medication on the reverse of this form.

Section B. Have you ever had or do you have any of the following:

Arthritis

Migraine

Muscular pain

Asthma

Issues relating to: (please elaborate)

Neck problems

Knees

Other

Lower back/Pelvis

Ankles

Cramps

- Work at a low level on your first visit and concentrate on learning to do the exercises properly. Do this each time you are taught a new exercise. On each visit you will progress a little more.
- Should you feel *sharp pain or discomfort* at any stage during your session, **STOP** immediately and advise your instructor.
- Should you suffer from an injury, illness or any change in your condition in the future, please advise the instructor to update your records and modify your program accordingly.
- It is recommended by the American College of Sports Medicine that all males over 35 and females over 45 should have a medical assessment including an exercise E.C.G. and cholesterol count (including lipid count) prior to undertaking any exercise program.

Statement:

I recognise that the instructor is not able to provide me with medical advice with regard to my medical fitness and that the information provided by me is used as a guideline as to the limitations of my ability to exercise. I have answered the questions to the best of my ability and understand the advice that has been given to me.

Signed:

Dated:

I accept that if I am under the age of 18 and I have to scale the workout and listen to the trainer that is on duty of the class.