

PHYSICAL ACTIVITY READINESS QUESTIONNAIRE (PAR-Q)

Name:			Date:
DOB:	Age:	Home Phone:	Work Phone:

Yes	No	Has your doctor ever said you have a heart condition and you should only do physical activity as recommended by a doctor?
Yes	No	Do you feel pain in your chest when you do physical activity?
Yes	No	In the past month, have you had chest pain when you were not doing physical activity?
Yes	No	Do you lose consciousness or do you lose your balance because of dizziness?
Yes	No	Do you have a bone or joint problem that may be made worse by a change in your physical activity?
Yes	No	Is your doctor currently prescribing medications (for example, water pills) for your blood pressure or heart condition?
Yes	No	Do you have insulin dependent diabetes?
Yes	No	Do you know of any other reason you should not exercise or increase your physical activity?

If you answered YES to one or more questions:

- ◆ Talk to your doctor **BEFORE** you become more physically active or **BEFORE** you have a fitness appraisal. Tell your doctor your intent to exercise and to which questions you answered yes.
- ◆ You may be able to do any activity you want – as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those that are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.

If you honestly answered NO to all questions, you can be reasonably sure that you can:

- ◆ Start becoming much more physically active – begin slowly and build up gradually. This is the safest and easiest way to go.
- ◆ Take part in a fitness appraisal – this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively.

If your health changes so you then answer YES to any of the above questions, seek guidance from a physician.

Participant Signature:	Date:
Signature of Parent/Guardian (if participant is a minor):	Date: