

HEALTH QUESTIONNAIRE FOR YOGA STUDENTS

This questionnaire has been designed to help you to enjoy your class safely. All information given will remain private and confidential.

Name.....

Best phone number to call if I have to cancel a class last minute

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Next of Kin contact number.....

Address.....

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E-mail.....

Occupation.....

Age Group <15 16-20 21-30 31-40 41-50 51-60

 61-70 71-80 81+

Have you practised yoga before?

Are you are newcomer to physical activity?

Have you any history of heart trouble?

Have you suffered from any serious illness/surgery in the last 6 months? If yes – Outline briefly below.

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Have you suffered from fracture? If yes – Outline briefly below.

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Do you regularly take medication? YES/NO please specify:

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Have you had a baby in the last six months YES/NO
(It is advisable not to resume any form of exercise for 12 weeks following the birth.)

If you are pregnant or become pregnant please inform your instructor before you take part in the class.

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Do you suffer from any of the following? (if 'yes' please give further details on any other comments section, page 2)

Asthma	Bone or joint problems	Dizziness	Palpitations
Arthritis	Cancer	Multiple Sclerosis	Deafness
Breathing problems	Chest pain	Headaches	High/low Blood pressure
Back pain	Poor eyesight	Epilepsy	Varicose veins
Knee pain	Diabetes	Osteoporosis/Osteopenia	

If you have joint or back pain can you be specific about what and where and what aggravates it?

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If there are any other conditions that may effect your participation please detail them below in the section provided for any other comment.

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Please say briefly why you are joining the class and what you are aiming to get out of a yoga class:

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Any other comments:

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With regards to all forms of exercise if you have any doubt about your level of health and fitness it is advisable to consult your GP prior to the commencement of any new fitness plan. The instructor must be informed of any injuries, handicaps or medical problems prior to joining the classes. The instructor cannot accept responsibility for personal injury whilst participating in a class if: a) You have been advised against exercise on the basis of a pre-existing health condition by your GP. b) You fail to observe the techniques & instructions given regarding safety.

I acknowledge that I exercise at my own risk.

Signed..... Date.....