

Pilates Health Questionnaire

1. Are you currently or have you ever experienced any of the following?			
	If Yes please give further detail	Yes	No
Low back pain			
Pelvic pain			
Any other spinal condition			
Any other orthopaedic condition			
Heart problems			
High or low blood pressure			
Epilepsy (Grand mal seizures)			
2. Are you pregnant? If so how many weeks pregnant are you?			
3. Have you had any complications with your pregnancy? If Yes, please give details.....			
4. Have you ever had an episode of low back pain?			
5. If yes, how many previous episodes of low back pain have you had?			
6. Have you had any recent injuries or surgery? If yes, please give details.....			
7. Circle any of the conditions that you have been diagnosed with or have had treatment for:			
Asthma Arthritis Stroke Diabetes Depression Bronchitis Cancer Dermatitis			
<p><u>PILATES PARTICIPATION INFORMED CONSENT</u></p> <p>The Pilates programme will begin at a low level and will be advanced in stages depending on your fitness level. We may stop the exercise session because of signs of fatigue or excessive strain. It is important for you to realize that you may stop when you wish because of feelings of fatigue or any other discomfort.</p> <p>There exists the possibility of certain dangers when exercising. They include abnormal blood pressure, fainting, irregular, fast or slow heart rhythm, and in rare instances, heart attack, stroke or death. Whilst every care will be taken, it is impossible to predict the body's exact response to exercise. Every effort will be made to minimize these risks by evaluation of preliminary information relating to your health and fitness and by observations during exercising. Emergency equipment and trained personnel are available to deal with unusual situations that may arise.</p> <p>I understand that with certain conditions a degree of undressing may be required during the assessment, and that the Pilates instructor will explain this to me at the time. I understand that the Pilates programme will be specifically designed as a personal training plan, and will take into account details given in my health questionnaire and assessment. Therefore, this programme of exercise should only be undertaken when in a Pilates class, or when I have been given specific instructions to exercise on my own.</p> <p>Please note refunds are not available once the course has started.</p> <p>THIS INFORMATION IS PROTECTED BY THE DATA PROTECTION ACT 1984</p> <p>Signed</p> <p>.....Date.....</p>			