

Southern Vermont Recreation Center Physical Activity Readiness Questionnaire

Name _____ Male Female
 Address _____ D.O.B. _____
 City _____ State _____ Zip _____
 Phone _____ Email _____
 Physician's Name _____ Phone _____

YES NO

- Has a doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?
 - Do you feel any pain in your chest when you do physical activity?
 - In the past month, have you had chest pain when not doing physical activity?
 - Do you lose your balance because of dizziness or do you ever lose consciousness?
 - Do you have a bone or joint problem that could be made worse by a change in physical activity?
 - Is your doctor currently providing medicine for your blood pressure or heart condition?
 - Do you know any other reason that you should not do physical activity?
Explain: _____
 - Do you currently participate in any regular activity program designed to improve or maintain your physical fitness?
 - Are you a smoker or have you quit within the last 6 months?
 - Do you experience back pain, joint, tendon, or muscle pain, or respiratory problems?
- Do you experience or have a family history of any of the following conditions:**
- Heart Disease or Heart Attack?
 - High Blood Pressure?
 - High Cholesterol?
 - Diabetes?

(PLEASE TURN OVER)

I hereby acknowledge that my participation in the Southern Vermont Recreation Center is entirely voluntary on my part and solely for my own pleasure and benefit. I realize that the physical fitness equipment provided can be potentially dangerous and that if I am unsure of the proper operation of any equipment, I should ask for assistance from the fitness staff. In addition, I understand that I should immediately cease using any malfunctioning equipment and report to the fitness staff equipment in need of repair. I acknowledge that the use of the SVRC's facilities involves risk of personal injury, including heart attack and other coronary complications. With this knowledge, I understand that I assume all responsibility for all risk of injury that may occur in the SVRC.

In consideration of being accepted as a participant of the center, I agree to release and hold harmless the Southern Vermont Recreational Center and their agents, servants, and employees from all claims, liability, demands, rights, and causes of action, present or future, whether known, anticipated, or unanticipated, resulting from or arising out of, or incident to Member's use of, presence at, or membership in the Center.

Signature: _____ Date: _____

Printed Name: _____