

CIRCUIT TRAINING ASSESSMENT FORM

Name:

Tel No:

D.O.B:

Mobile:

Address:

E mail:

Occupation:

How did you here about Personal Best?

Have you ever been advised against strenuous exercise?
(If yes please give details)

Are there any movements that cause you pain (e.g. raising arms, bending forward or to the side)
(If yes please give details)

Do you have any known cardiovascular problems (heart disease, previous heart attack, abnormal ECG etc)?
(If yes please give details)

Have you ever been told that you have arthritic joints or any bone or joint problem?
(If yes please give details)

Have you had any operations or injuries in the last year?
(If yes please give details)

Do you know of any other reason why you should not do physical activity?

Do you have any fresh wounds as a result of surgery or outpatient procedures?
Have you had a recent joint replacements (implants)?
Is there any chance you could be pregnant?

Do you/have you suffered from any of the below
Hernia
Spinal or disc degeneration and deformity of the joint(s)
Severe diabetes
Epilepsy
Tumours
Inflammatory disorders
Migraines
Pacemaker
Recently placed IUD, metal pins, bolts and or plates

Do you have varicose veins?
Do you sleep well?
Do you suffer from headaches?
Do you suffer from backache?
Do you smoke?

Are you currently under the supervision of a physiotherapist/chiropractor etc?
Name.
Are you currently on any prescribed medication?
(If yes please give details)

What are your goals, re training?

Informed Consent

Circuit training provides a challenging whole body workout, which incorporates intervals of high intensity cardio work with strength and conditioning work.

Each exercise will have easier/harder alternatives for you to choose

It is important that you pace yourself accordingly to your fitness level

It is imperative that you notify your instructor before your class of any injury or concern you have re training

The emphasis within each class is always quality over quantity, please practice good technique at all times to ensure positive results and avoid injury
As always it is important to consult your physician before starting an exercise program, particularly if you are new/returning to exercise or have been suffering from a particular medical condition: If you feel any physical symptoms when you start your exercise program, inform your trainer and contact your physician right away.

I have read the information on this page and any questions concerning the information and procedures have been answered to my satisfaction.

Signature of client

Date



ONE TO ONE PERSONAL TRAINING | CHIROPRACTIC | SPORTS MASSAGE

Frogmarsh Mill, South Woodchester, Stroud GL5 5ET. Tel 01453 873811 Email: carl@personalbeststudio.co.uk

www.personalbeststudio.co.uk