**Par-Q form**

**1. Medical history.**

i) Has anyone in your family ever suffered from heart disease, stroke, or raised cholesterol?

ii) Are you taking any medication? Please give details:

iii) Has your Doctor ever said you should only do medically supervised physical activity?

iv)) Is there anything in your medical history you feel could affect your ability to exercise?

v) Please tick if you have experienced any of the following:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Gout |  | Glandular fever |  | Raised cholesterol |  |
| Hernia |  | Rheumatic fever |  | Stroke |  |
| Stomach/ duodenal ulcers |  | Any heart condition |  | Heart murmur |  |
| Epilepsy |  | High blood pressure >140/90 |  | Dizziness or fainting |  |
| Diabetes |  | Palpitations/pains in the chest  |  | Arthritis |  |
| Asthma |  | Cramps |  | Shortness of breath |  |

If you have ticked yes to any of the above then please give details.

**Physical state**.

i) Do you smoke? If yes, how many a day

ii) How much alcohol do you drink a week

iii) Do you have any pains or injuries to the following areas: neck, back, knees or ankle?

**3. Declaration.**

I have answered the questions to the best of my knowledge. I recognize that my instructor is not able to provide me with medical advice regarding my medical fitness and that this information is used as a guideline in terms of my exercise and fitness state.

**Sign and date:**

**2. Training details**

i) Have you ever worked with a coach before? If so, describe what was good or bad about it?

ii) What do you hope to get from this coaching relationship?

iii) Have you had any injuries in the last 6 months?If yes, please explain.

iv) Did you follow a training plan before? If yes, what did you do?

v) Average # miles/km per week in peak training?

vi) Longest distance for LSR in peak training and now.

vii) Do you include any of the following in your training? (Please circle and give a brief description.)

*Short speed intervals / Tempo runs / Hill repeats / Strength work*

viii) How many days do you run per week during peak training?

ix) How many times a week are you running now?

x) What would you say is your strength and weakness in your training?

xi) Do you cross train or participate in any other sports?

xii) How often a week do you stretch out, do yoga or mobility exercises?

xiii) What are your most favourite and least favourite workouts?

xiv) Do you have access to a gym? If not what equipment do you have at home?

**3. Goals:**

What are your short term goals? (3 months goals.)

Fitness:

Diet:

Lifestyle:

What are your goals in the next 6 months?

Fitness:

Diet:

Lifestyle:

What are your long term goals? (12 months or more.)

Fitness:

Diet:

Lifestyle:

**4. Motivation**

i) What motivates you and why?

ii) Why do you run?

iii) How motivated are you on a scale of 1 to 10 to achieve your goals? (Where 10 is highly motivated.)

**5. Lifestyle**

i) When and how much does your schedule allow you to train?

ii) Are there any lifestyle changes that you need to do to meet your goals?

iii) Is there anything else that could interfere with your training?

**6. Nutrition**

i) What is your current height and weight? H: Wt:

ii) Describe your current nutrition.

iii) Are there any foods that you avoid or cause you discomfort?

iv) Do you eat on a longer run? If so, what?

v) What do you use as a recovery fuel?

vii) How much water do you drink daily?

**7. Anything else / comments that I should know about?**

**Signed and dated:**