



# PILATES HEALTH QUESTIONNAIRE

1) Are you currently experiencing any of the following conditions: If yes, please give further details			
Low back pain.	Y / N		
Pelvic pain.	Y / N		
Any other spinal condition.	Y / N		
Any other orthopaedic conditions.	Y / N		
Heart problems.	Y / N		
High or low blood pressure.	Y / N		
Epilepsy (Grand mal seizures).	Y / N		
2) Are you pregnant? If yes, how many weeks?			
3) Have you had any complications with your pregnancy? If so please give details			
4) Have you ever had an episode of lower back pain?			
5) If yes, how many <b>previous episodes</b> 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 following conditions that you have been diagnosed with or have had treatment for:			
Asthma	Arthritis	Stroke	Diabetes
Depression	Bronchitis	Cancer	Dermatitis
<b><u>PILATES PARTICIPATION INFORMED CONSENT</u></b>			
<p>The Pilates program 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 realise that you may stop when you wish because of feeling 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 hearth rhythm, and in rare cases 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 minimise 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 the Pilates instructor will explain this to me at the time. I understand that the Pilates program will be specifically designed as a personal training plan, and will take into account details given in my health questionnaire and assessment. Therefore, this program 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 a full fee may be applicable if less than 24 hours notice is given for all cancellations.</p> <p>THIS INFORMATION IS PROTECTD BY THE DATA PROTECTION ACT 1984.</p>			
Signed:			Date: