

BGSU-RECREATIONAL SPORTS-FITWELL PROGRAM

PAR-Q  
(PHYSICAL ACTIVITY READINESS QUESTIONNAIRE)

Name \_\_\_\_\_ Email \_\_\_\_\_

Cell Phone \_\_\_\_\_ BGSU: Student (circle one) Fr., So., Jr., Sr., Grad.  
Faculty \_\_\_\_\_  
Staff \_\_\_\_\_  
Alumnus/other \_\_\_\_\_

(NOTE: The purpose for this questionnaire is to serve as a part of pre-screening for both Fitwell and Personal Training. If you respond "Yes" to any question, a staff member from Fitwell will contact you.

- |   | YES   | NO    |
|---|-------|-------|
| 1. Has your doctor ever said you have a heart problem?  | _____ | _____ |
| 2. Do you frequently suffer from pain in your chest?  | _____ | _____ |
| 3. Do you often feel faint or have spells of severe dizziness?  | _____ | _____ |
| 4. Has a doctor ever told you have a none or joint problem such as arthritis that has been aggravated by exercise, or might made worse by exercise? | _____ | _____ |
| 5. Is there a good physical reason not mentioned here why you should not follow an activity program even if you wanted to?                          | _____ | _____ |
| 6. Are you over 65 and not accustomed to vigorous exercise?   | _____ | _____ |
| 7. Has your doctor ever told you that you have high blood pressure?   | _____ | _____ |
| 8. Have you ever been told you have a heart murmur?   | _____ | _____ |
| 9. Are you a smoker?  | _____ | _____ |

**IF YOU ANSWERED "YES" TO ANY QUESTION, PLEASE PROVIDE A BRIEF EXPLANATION: (USE BACK OF THIS SHEET IF NECESSARY)**

I HAVE ANSWERED THE ABOVE QUESTIONS TO THE BEST OF MY KNOWLEDGE.

Print name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Would you like an: Equipment orientation (circle one) YES NO  
Fitness assessment (circle one) YES NO

Do you want information on any of the following topics? (If yes, please circle)

Strength	machines	free weights	sculpt classes
Cardiovascular	bikes	ellipticals	treadmills
Flexibility	pilates	stability balls	stretching
Stress Management		yoga	tai chi
Other	_____		

Office use only: Amount Paid: \_\_\_\_\_ CSR: \_\_\_\_\_ Date: \_\_\_\_\_