



# BOOT CAMP

## Enrolment form

Name..... Date of Birth.....

Address.....

..... Postcode.....

Contact Telephone Number.....

Email Address.....

How did you find out about FitMK Boot Camp? .....

### Physical Activity Readiness Questionnaire (PAR-Q)

- 1. Has a doctor ever said that you have a heart condition? Y/N
- 2. Do you have chest pain when participating in physical activity? Y/N
- 3. Have you ever or do you suffer from asthma or any respiratory disorders? Y/N
- 4. Have you ever suffered from high or low blood pressure? Y/N
- 5. Are you currently taking any medication? Y/N
- 6. Have you a diagnosed joint or bone disorder that may be made worse by physical activity? Y/N
- 7. Do you ever feel unusually dizzy or lose your balance? Y/N
- 8. Do you ever suffer from palpitations? Y/N
- 9. Are you pregnant or have you given birth in the last 6 weeks? Y/N
- 10. Do you suffer form diabetes or any other metabolic disease? Y/N
- 11. Are there any other health problems you have or may have which are not mentioned above could be affected by exercise? Y/N

Your health is the top of our agenda. So if you have answered **YES** to **ANY** of the above questions, we will require a letter from your doctor stating that you are in good enough health to be able to undertake an outdoor exercise programme. Be aware that your doctor may charge you for this letter. Please send your letter with this form, signed to FitMK Boot Camp, 7 Digby Croft, Middleton, Milton Keynes MK10 9JX. Once received, we will email you to confirm that you can book sessions through FitMK.com

I hereby affirm I am in good state of health and capable of participating in the fitness activities for which this assumption of risk is prepared. I am aware of all inherent dangers in exercise participation. I also acknowledge and fully understand I will be engaging in activities that involve risk of serious injury, including permanent disability or death, and severe social and economic losses which might result not only from my own actions, inaction, or negligence, but action, inaction or negligence of others, or the condition of the premises on or off site or of any equipment used and further, that there may be other unknown risks not reasonably foreseeable at this time, assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death, hereby release, discharge, covenants not to sue and/or otherwise indemnify FitMK /Activ8-Fitness, the instructors, managers, employees and members, including the owners and lessees of premises used to conduct the activity. FitMK, Activ8-Fitness and any individuals associated are not responsible for the condition of workout areas. I understand that it is my responsibility to consult my GP to determine my fitness to participate.

Signed ..... Date.....