

LIFESTYLE QUESTIONNAIRE

Name: _____ DOB: _____ Age: _____ Sex: _____
Email: _____ Suburb: _____
Emergency Contact Name: _____ Ph: _____
Occupation: _____ Have you used a gym before? _____

Section 1: Lifestyle and current exercise habits

Are you currently exercising regularly?

- If yes, please give details below:
 - Type of exercise: _____
 - Frequency of exercise (times per week): _____
 - Perceived intensity when exercising: _____
- Do you smoke? -
 - If yes, how many per day?
1 – 5 6 – 10 11 – 15 16 – 20 21 – 25 25+
- Are you allergic to anything? _____

Additional information: _____

Section 2: Nutrition

On an average day what do you eat and drink?

Meal	Time	Food / Drink (including quantities)

Section 3: Please indicate what you hope to achieve.

- To reduce body fat
- To improve aerobic capacity (heart/lung fitness)
- To gain some muscle definition
- To gain overall fitness
- To generally tone up _____
- To gain strength _____
- Other _____

Additional information: _____

Please read the following statement carefully.

I recognise that fitness professionals are not able to provide me with medical advice with regard to my fitness, and that this information is used as a guideline to the limitations of my ability to exercise. I have answered questions to the best of my ability and understand the advice above.

Signed:

Date:

WHERE PARTICIPANT IS UNDER 18 YEARS OF AGE

I _____ being the parent or guardian of the person named in this acknowledgment and release

HEREBY ACKNOWLEDGE AND AGREE:

- I have read the whole document and understand it.
- I consent to the person named in this acknowledge and release participating in the activity and
- I am aware of the risks, dangers and obligations set out in this acknowledgment and release.

IN CONSIDERATION of the person named in this Acknowledgment and Release being accepted to participate in the activity **I AGREE TO RELEASE AND INDEMNIFY** the Fitness Centre Operator in the same manner and to the same effect as if I were the person first named in this Acknowledgment and Release and the person participating in the activity.

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: __/__/__