## THE PEARSON CENTRE FOR YOUNG PEOPLE

## YOUTH HEALTH QUESTIONNAIRE (PAR-Q)

Personal Details (Please write in BLOCK CAPITALS)

Name	Age
Address	
Postcode Email Addr	ess
Telephone Number Emergency	Telephone Number
Do you have any of the following? (Please tick)	
Epilepsy Diabetes Heart Proble	ms
Joint Problems Movement Allergies (eg Osgood Disabilities (Please specify) Schlatters)	
Has anyone in your family had a heart problem when young? (Please tick)  Have you ever been	in hospital? (Please tick)
Yes No Yes	No
If you have been in hospital, please specify when and for what reason	
What do you normally do during break-times at school? (Please tick)	
Play a game or sport Use school library Talk to your friends	ends
Eat food (please specify)	
Other (please specify)	
How many hours a day do you watch TV?	
Less than 1 hour 1 - 2 hours 3 - 4 hours 4 - 5 hours	More than 5 hours
How many hours a day do you play computer games?	
Less than 1 hour 1 - 2 hours 3 - 4 hours 4 - 5 hours	More than 5 hours
Do you play outside of school, either with your friends or in teams? (Please tick	)
Yes, with friends Yes, in a team No	
Does it usually make you feel (please tick)	
Hot Sweaty Out of breath No change	

Other (please specify)
Does being involved in physical activity such as cycling, gymnastics, football, netball etc make you feel (please tick)
Happy Sad Closer to friends Alone
Other (please specify)
Do you think being active is a good thing? (please tick)
Yes No
Why?
IMPORTANT: Terms and Conditions
Appropriate attire and footwear must be worn at all times. Jeans or clothing with studs is not suitable attire. If a member requires medication during their visit, a parent and guardian must agree that a registered leader from The Pearson Centre can administer it. Any accidents, however minor, will be documented in the Centre first aid book. All members using the gym are subject to the behaviour policy which is clearly displayed in the youth gym. Management's decision regarding this is final and is subject to change at any time without notice. All members will be given an induction programme which is fully supervised. Neither the company, nor any employees or agent of the company shall be responsible for any death, personal injury or illness occurring upon the Centre premises or as a result of the use of facilities and/or equipment provided by the Centre, except to the extent that such death, personal injury or illness arises from any negligent act or omission of the company or its employees or agents.
Signing below indicates that you have read and agree with the terms and conditions above.
Signed: Date: (Parent/Guardian)
PRINT NAME: