

Informed Consent and Agreement Form

I desire to engage voluntarily in Mind Body Healthys' Strong Body Fitness Outdoor Boot Camp to improve my physical fitness.

I know that I am required to fill out a health and lifestyle questionnaire before I begin to exercise. The information obtained from the questionnaire will be used in the following ways.

- To indicate any cardiac risk or other reason why I should not exercise based on the ACSM guidelines
- To determine the need for a physician's evaluation and written approval before I enter the exercise program
- To recommend the types of exercise I should concentrate on to reach my fitness goals and the types of exercises I should avoid

I understand that my participation in the program may not benefit me directly in any way. I realize that the program may help me evaluate my lifestyle, choose the activities I may safely carry out, and increase my quality of life.

I also understand that the reaction of the body to activity cannot always be predicted with complete accuracy. The changes that may occur and are associated with physical activity include, but are not limited to, the following signs and symptoms:

- Abnormal blood pressure or heart rate responses
- Breathlessness
- Chest discomfort
- Muscular or skeletal injury
- Heart attack and death, in very rare instances

I realize my responsibility in recognizing these potential hazards; monitoring myself before, during, and after exercise; and seeking help in the event of injury, if possible. I understand that I can minimize my risk during exercise by following these steps:

- I will give priority to regular attendance
- I will not withhold any information pertinent to my health from the instructor or supervisor in charge of the program, and I will immediately update my health and lifestyle questionnaire if changes in my medication or status occur.
- I will report any unusual symptoms or problems that I experience before, during or after exercise.
- I will follow the amounts and types of activities recommended during the orientation session
- I will not exceed my target heart rate
- I will not exercise when not feeling well or for 2 hours after eating a large meal, smoking a cigarette, drinking alcohol, or taking over-the-counter medications or street drugs
- I will cool down slowly after exercise and will not take an extremely hot shower after exercise
- I will not undertake exercises that I know by my experience or my physician's or therapist's recommendation to be painful or detrimental to me.

I realize that unsupervised exercise done on my own is performed at my own risk, even though I may be following guidelines or recommendations established during this program.

The information obtained from this exercise program will be treated as privileged and confidential and will not be released to any person without my written consent. Information regarding my health and program may be shared with instructors involved in my instruction or physical training. The information obtained also may be used for statistical or scientific purposes, with my right to privacy retained.

I, the undersigned, waive and release Boot Camp in the Park / Daina Gardiner and its employees, officers, or directors from any and all claims in any way connected with my participation in this program. This agreement is binding on my heirs and executors.

I acknowledge that I have read or heard this document in its entirety and that I fully understand it. I have asked any questions that may have occurred to me and have been answered to my satisfaction.

Initials _____

PAR-Q & YOU

(A Questionnaire for People Aged 15 to 69)

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. Being more active is very safe for most people. However, some people should check with their doctor before they start becoming much more physically active.

If you are planning to become much more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if you should check with your doctor before you start. If you are over 69 years of age, and you are not used to being very active, check with your doctor.

Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly: check YES or NO.

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor?
<input type="checkbox"/>	<input type="checkbox"/>	2. Do you feel pain in your chest when you do physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	3. In the past month, have you had chest pain when you were not doing physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	4. Do you lose your balance because of dizziness or do you ever lose consciousness?
<input type="checkbox"/>	<input type="checkbox"/>	5. Do you have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in your physical activity?
<input type="checkbox"/>	<input type="checkbox"/>	6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?
<input type="checkbox"/>	<input type="checkbox"/>	7. Do you know of <u>any other reason</u> why you should not do physical activity?

If
you
answered

YES to one or more questions

Talk with your doctor by phone or in person BEFORE you start becoming much more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

- You may be able to do any activity you want — as long as you start slowly and build up gradually. Or, you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.
- Find out which community programs are safe and helpful for you.

NO to all questions

If you answered NO honestly to all PAR-Q questions, you can be reasonably sure that you can:

- start becoming much more physically active — begin slowly and build up gradually. This is the safest and easiest way to go.
- take part in a fitness appraisal — this is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively. It is also highly recommended that you have your blood pressure evaluated. If your reading is over 144/94, talk with your doctor before you start becoming much more physically active.

DELAY BECOMING MUCH MORE ACTIVE:

- if you are not feeling well because of a temporary illness such as a cold or a fever — wait until you feel better; or
- if you are or may be pregnant — talk to your doctor before you start becoming more active.

PLEASE NOTE: If your health changes so that you then answer YES to any of the above questions, tell your fitness or health professional. Ask whether you should change your physical activity plan.

Informed Use of the PAR-Q: The Canadian Society for Exercise Physiology, Health Canada, and their agents assume no liability for persons who undertake physical activity, and if in doubt after completing this questionnaire, consult your doctor prior to physical activity.

No changes permitted. You are encouraged to photocopy the PAR-Q but only if you use the entire form.

NOTE: If the PAR-Q is being given to a person before he or she participates in a physical activity program or a fitness appraisal, this section may be used for legal or administrative purposes.

"I have read, understood and completed this questionnaire. Any questions I had were answered to my full satisfaction."

NAME _____

SIGNATURE _____

DATE _____

SIGNATURE OF PARENT _____

WITNESS _____

or GUARDIAN (for participants under the age of majority)

Note: This physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if your condition changes so that you would answer YES to any of the seven questions.