



## Physical Activity Readiness Questionnaire (PAR-Q) For Physical Classes & In-Person Training



**Student Name:**

**D.O.B.:**

**Address:**

**Email:**

**Mobile Phone No.:**

**What are your main reasons for starting martial arts?**

Has your doctor ever said you have a heart condition and that you should only do physical activity recommended by a doctor?

Yes/No

Do you feel pain in your chest when you do physical activity?  
In the past month, have you had a chest pain when you were not doing physical activity?

Yes/No

Yes/No

Do you lose balance because of dizziness or do you ever lose consciousness?

Yes/No

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?

Yes/No

Is your doctor currently prescribing medication for your blood pressure or heart condition?

Yes/No

Do you know of any other reason why you should not take part in physical activity?  
If YES, please comment:

**If you answered YES to one or more questions:**

You should consult with your doctor to clarify that it is safe for you to become physically active at this current time and in your current state of health.

**If you answered NO to ALL of the questions:**

It is reasonably safe for you to participate in physical activity, gradually building up from your current ability level if you deem it fitting and appropriate.

A fitness appraisal can help determine your ability levels.

**I have read, understood and accurately completed this questionnaire. I confirm that I am voluntarily engaging in an acceptable level of exercise and martial arts training, and my participation involves a risk of injury.**

**Signature:**

**Print Name:**

**Date:**

**Having answered YES to one of the questions above, I have sought medical advice and my GP has agreed that I may exercise.**

**Signature:**

**Print Name:**

**Date:**

**Note: This PAR Q becomes invalid should your condition change. Please notify your instructor immediately if you have concerns.**

The Seido Organisation in the UK is collecting this information for the purposes of understanding any medical considerations that should be taken by the instructor during class. The information will be stored in hard copy for 28 days. Thereafter the hardcopy form will be shredded. If the student decides to join Seido Karate as a fully subscribed member, the information will be stored electronically in the student record on Coacha.

Completion of this form provides temporary insurance for 28 days from the date above.

Copyright © BMABA Limited T/A British Martial Arts & Boxing Association. Students are reminded that it is their responsibility to ensure any material information is disclosed to the instructor or club in advance of any training to assist the instructors in delivering safe content. If you are not sure if you are suitable to participate on a medical or physical basis, please consult your GP prior to submitting this PAR-Q.

Learn more from [bmaba.org.uk/student](http://bmaba.org.uk/student)