

Recreation Oak Bay Personal Training

PERSONAL TRAINING CLIENT PACKAGE



Forms Included in this package:

- Health History Form
- Par – Q Form

- Personal Training Session Information
- Pricing Information

Instructions:

1. Please complete each form accurately and completely
2. Submit completed forms to Reception (Oak Bay or Henderson Recreation Centers)
3. Purchase your Personal Fitness Training sessions when you drop off your forms

You will be contacted within 72 hours by a trainer to set up your first appointment

Personal Training Sessions must be purchased prior to scheduling an appointment

Personal Trainers Bio's are posted at each fitness center and online www.recreation.oakbay.ca

Please note:

Packages expire after 1 year from the date of purchase

24 hours notice required for appointment cancellations

Medical Clearance may be required

This form will be attached to your online profile with Recreation Oak Bay

Cancellation Policy:

- 24 hours notice is required for appointment cancellations
- To cancel an appointment, first attempt to contact the trainer directly. If you are unable to reach the trainer or if you leave a message, please also call reception at 250-595-7946 and provide them with your appointment date, trainers name and reason for cancellation.
- If you cancel within 24 hours you may be charged for the appointment.

Please call 250-370-7117 if you have any questions,

Emma Welch, Fitness Programmer, Recreation Oak Bay



Health History Form

To be completed in full prior to starting personal training sessions

Name: _____ Birth Date: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

Family Doctor: _____ Phone Number: _____

1. Do you have any chronic illnesses?

Explain: _____

2. Do you take any Prescription Medication? If yes explain. _____

3. Do you take any over-the-counter medications or supplements? If yes, explain. _____

4. Have you had any bone, joint, muscle injuries or concerns – past and present? Please check and explain.

- | | | |
|-------------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Head | <input type="checkbox"/> Elbow | <input type="checkbox"/> Arms |
| <input type="checkbox"/> Neck | <input type="checkbox"/> Wrist | <input type="checkbox"/> Legs |
| <input type="checkbox"/> Shoulder | <input type="checkbox"/> Hips | <input type="checkbox"/> Chest |
| <input type="checkbox"/> Upper Back | <input type="checkbox"/> Knees | <input type="checkbox"/> Stomach |
| <input type="checkbox"/> Mid Back | <input type="checkbox"/> Ankles | <input type="checkbox"/> Other |
| <input type="checkbox"/> Lower Back | <input type="checkbox"/> Foot | |

Explain: _____

Have you had any surgeries? Explain. _____

5. Do you smoke? If yes, how often? _____

6. Rate your daily stress level from 1-10 (1= very low / 10 = very high) _____

7. How many hours do you regularly sleep per night? _____

8. Over the last 6 Months, what has been your 3 primary forms of exercise?

9. On a scale of 1-10, rate your current fitness level: (1 –unfit, 5 = Average, 10 = Very Fit) _____

10. Occupation/Daily Routine: (please check one) Sedentary Active Physically Demanding

12. Please outline your fitness goals and expectations from Personal Training.

- | | | |
|--|---|--|
| <input type="checkbox"/> Add Variety to Current Exercise Routine | <input type="checkbox"/> Improve Cardiovascular Fitness | <input type="checkbox"/> Increase Muscle Tone |
| <input type="checkbox"/> Build Muscle Mass | <input type="checkbox"/> Improve Health | <input type="checkbox"/> Learn correct form and exercise technique |
| <input type="checkbox"/> Enhance Sport Specific Skills | <input type="checkbox"/> Increase Flexibility | <input type="checkbox"/> Reduce Fat |
| <input type="checkbox"/> Improve Balance | <input type="checkbox"/> Increase Motivation | <input type="checkbox"/> Reduce Stress |

13. My Personal Training goals are? _____

14. Which obstacles or barriers are preventing you from attaining these goals _____

15. Which location would you prefer to train at? Oak Bay Recreation Centre Henderson Recreation Centre

16. What training package are you purchasing today?

Private Personal Training (one on one) 1 Hr Sessions Semi-Private Personal Training: (Per Couple) 1 ½ hour Sessions

- | | |
|--|--|
| <input type="checkbox"/> 1 session \$65 | <input type="checkbox"/> 1 Session \$110 |
| <input type="checkbox"/> 2 Session \$130 | |
| <input type="checkbox"/> 5 Session \$293 | <input type="checkbox"/> 3 Sessions \$305 |
| <input type="checkbox"/> 10 Session \$520 | |
| <input type="checkbox"/> 15 Session \$731 | <input type="checkbox"/> 10 Sessions \$ 961 |

17. Do you have a specific trainer you would like to work with? _____

18. What days and times work best for you to meet with your personal trainer? Please check all that apply.

	Monday	Tuesday	Wednesday	Thursday	Friday	Sat/Sun
6:00am-9:00am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9:00am-12:00p	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12:00pm-5:00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5:00pm-9:00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 _____
or GUARDIAN (for participants under the age of majority)

WITNESS _____

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.