Vanderbilt Hall Athletic Facility
Physical Activity Readiness Questionnaire (PAR-Q)

Name (print) ________________________________________     Date ___________________
Home Phone _____________________________  Work Phone ________________________
E-mail Address ________________________________________________________________
Employer _______________________________   Position ___________________________
Emergency Contact ________________________________     Phone _____________________

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 15-69, the PAR-Q will tell you if you need to check with
your doctor before you start. If you are over 69 years of age, and you are not used to being 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. Checking YES to any answer will require you to get a physicians
clearance before starting an exercise program.

YES  NO
☐ ☐  1. Has your doctor ever said that you have a heart condition and that you
should only do physical activity recommended by a doctor?

☐ ☐  2. Do you feel pain in your chest when you do physical activity?

☐ ☐  3. In the past month, have you had chest pain when you were not doing
physical activity?

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

☐ ☐  5. Do you have a bone or joint problem that could be made worse by a
change in your physical activity?

☐ ☐  6. Is your doctor currently prescribing drugs (for example, water pills)
for your blood pressure or heart condition?

☐ ☐  7. Do you know of any other reason why you should not do physical activity?

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

☐  Within the last 6 months have you been involved in a regular exercise program? Yes  No
☐  Are you interested in meeting with a Personal Trainer to set up a personal workout plan? Yes  No