

Please explain any "yes" answers below: -

DISCLAIMER: Agreement in Participating in Personal Running Training

In signing this consent form,

- I acknowledge that it is a condition of participating in this activity that I do so at my own risk
- I accept all risks and hereby indemnify and release Front Runner Sports- the coach, their affiliates, employees, members, sponsors, promoters and any person or body directly and indirectly associated with the coach, against all liability (including liability for their negligence and the negligence of others) claims, demands and proceedings arising out of or connected with my participation in this activity
- I acknowledge that participating in this activity may involve a risk of serious injury or even death from various causes including: over exertion, dehydration, equipment failure and accidents with equipment and surroundings
- I recognise the difficulties associated with the activity and attest I am physically fit to participate safely in the activity and that a qualified medical practitioner has not advised me otherwise
- I understand the demanding physical nature of this activity. I am not aware of any medical condition, injury or impairment that will be detrimental to my health if I participate in this activity. In the event that I become aware of any medical condition, injury or impairment that may be detrimental to my health if I participate in this activity my coach will be immediately informed. By continuing to participate in this activity, I accept the risks despite these conditions and still, and will always be under the terms of this agreement.
- I certify that I am 18 years or older and have read this document and fully understand it OR As a parent or guardian of the participant, I agree to the above for myself and on behalf of the participant and I indemnify and will keep indemnified any person or body directly or indirectly associated with the conduct of the activity or the terms referred to

(Signature of participant or parent/guardian if under 18)

Date

(Print Name)

Thank you for taking the time to complete this Health History questionnaire. It is important for planning your training program. All information is strictly confidential and will not be used or passed to any third party with without prior written consent of all parties.

PLEASE ENSURE THAT YOU ALSO COMPLETE THE EXERCISE HISTORY FORM BELOW

Kind regards,

Raf Baugh
Managing Director, Front Runner Sports.

OFFICE Use Only-

Does this client require medical clearance prior to commencing training? YES NO

FRONT RUNNER COACHING Exercise History Form

Name: _____ Date: _____

Please fill out this form as completely as possible.

1. Please rate your exercise level on a scale of 1-5 (5 indicating very strenuous) for each age range through your present age: -

15-20 _____ 21-30 _____ 31-40 _____ 41-50+ _____

2. Are you currently following a regular cardiovascular exercise program?

YES NO If yes, specify the type of exercise(s): _____

_____ Minutes per day _____ Days per week

3. How long have you been following a regular cardiovascular exercise training program?

_____ Months _____ Years

4. Are you currently following a resistance weight training program?

YES NO If yes, specify the type of exercise(s): _____

_____ Minutes per day _____ Days per week

How long have you been following a regular resistance training program?

_____ Months _____ Years

Rate your perception of the exertion of your resistance training program: -
(*Highlight the number*) (1) Light (2) Fairly light (3) Somewhat hard (4) Hard

5. What exercise, sport or recreational activities have you participated in?

In the past 6 months? _____

In the past 1-2 years? _____

In the past 5 years? _____

6. How much time do you have available for training per week?

_____ Hours/wk _____ Days/wk

Which days do you have most time? _____

Which days do you have least time? _____

7. What type of exercise interests you?

Running

Cycling

Swimming

Walking

Stepper

Stretching

Other, please specify: - _____

8. What is the main goal of your undertaking a training program?

9. Which specific sporting events or competitions would you like to compete in?

The next 6 months

The next 1-2 years

3 years +

10. Rank your goals in undertaking exercise:

Use the following scale to rate each goal separately

Extremely important (10) Somewhat important (5) Not at all important (1)

1 2 3 4 5 6 7 8 9 10

a. Improve cardiovascular fitness

b. Body-fat weight loss

c. Reshape or tone my body

d. Improve performance for a specific sport

e. Improve moods and ability to cope with stress

f. Improve flexibility

g. Increase strength

h. Increase energy level

i. Feel better

j. Enjoyment

k. Other

Thank you for taking the time to complete this Exercise History questionnaire.

Once you have completed this form, please email back to

admin@frontrunnersports.com.au prior to your appointment with the coach

Kind regards,

Raf Baugh

Managing Director, Front Runner Sports.