



Best Day/s and Times for future training/sessions:

**Medical & General History**

Heart condition  
Family History of Heart Disease or Stroke  
Asthma  
Diabetes  
Epilepsy  
High/Low blood pressure

**Do you suffer from?**

High cholesterol  
Arthritis  
Muscular pain or cramp  
A hernia  
Chronic Cough  
Back pain

**TICK if YES**

**Do you experience, or have you experienced?**

Pain or tightness in the chest  
Any major injuries \*  
Liver/kidney conditions  
Any Infections or infectious diseases  
Have you been hospitalized lately?

Heart palpitations  
Rheumatic Fever  
Regular headaches  
Any other important health related info – list below  
**Are you Covid Vaccinated? Y / N.**

**TICK if YES**

\*Injuries currently? Y/N If yes describe + other health info:

Do you smoke? Y/N..... Drink alcohol? Y/N .....

Are you on any medication? Y/N .....

Special conditions? Eg. Pregnant, condition that may limit your activity program

**If you answered YES to any questions about your health, have you clearance from a Doctor to exercise? Y/N**

**TERMS & CONDITIONS:** \* All my personal details are true and correct.

- **Update your details.** Client must inform **APT** of all new injury or medical conditions not stated on this form that may develop after today's date (below)
- **APT** cannot be held liable for any injury or medical condition to client that occurs during or outside of client training time.
- Clients who do not cancel **with 24 hours notice** will be charged full fee for the cancelled session.
- **Cancellation Policy**  
**Classes & Sessions @ Phoenix, Studio 1 or Private Studio :** Please **sms or call** if you are unable to attend your regular session to enable others to book in (Casual bookings 24 hr policy as for PT's). **50% Refund only if you cancel within 48 hours of Commencement date of Term.**  
**Personal Training sessions:** All cancellations must be received at least **24 hours** before your training session in order to avoid being charged for your session.
- **If you cannot attend a session, please call or sms: 0412 585181 (do not email please)**  
I have read, understand and agree to the above terms and conditions:

Signature:.....Date:.....20.....  
(IF UNDER 18 YEARS – PARENT TO SIGN)

