

MEDICAL HISTORY FORM

LUCKY'S SPORTS & FITNESS COACHING PTY LTD & WESTS+PLUS CRICKET ACADEMY



PERSONAL DETAILS

NAME: _____ GENDER: _____ DOB: _____ EMAIL ADDRESS: _____
ADDRESS: _____ MOBILE NUMBER: _____ OCCUPATION: _____
WEIGHT: _____ HEIGHT: _____ TODAY'S DATE: _____

MEDICAL DETAILS - DO YOU NOW, OR HAVE YOU HAD IN THE PAST:

Y N

EXPLAIN

1. HISTORY OF HEART PROBLEMS, CHEST PAIN OR STROKE? Q1.
2. INCREASED BLOOD PRESSURE? Q2.
3. ANY CHRONIC ILLNESS OR CONDITION? Q3.
4. DIZZINESS, LOSS OF BALANCE OR FAINTING? Q4.
5. DIFFICULTY WITH PHYSICAL EXERCISE? Q5.
6. RECENT SURGERY (LAST 12 MONTHS)? Q6.
7. HISTORY OF BREATHING OR LUNG PROBLEMS? Q7.
8. SWOLLEN, STIFF, OR PAINFUL JOINTS? Q8.
9. FOOT, BACK OR SHOULDER PROBLEMS? Q9.
10. ANY SIGNIFICANT VISION OR HEARING PROBLEMS? Q10.
11. HEART PROBLEMS IN IMMEDIATE FAMILY? Q11.
12. DO YOU HAVE ASTHMA? Q12.
13. HERNIA, OR A CONDITION THAT MAY BE AGGRAVATED BY LIFTING WEIGHTS? Q13.
14. DO YOU HAVE ANY OTHER MEDICAL CONDITIONS OR PROBLEMS NOT PREVIOUS MENTIONED? Q14.

EXERCISE AND PHYSICAL ACTIVITY DETAILS - DO YOU NOW, OR HAVE YOU HAD IN THE PAST:

Y N

EXPLAIN

15. ARE YOU CURRENTLY INVOLVED IN A REGULAR FITNESS/SPORT PROGRAM? Q15.
16. ARE YOU INVOLVED IN A GROUP SPORTS PROGRAM? IF YES, WHAT TYPE AND HOW OFTEN? Q16.
17. ARE YOU INVOLVED IN A STRENGTH TRAINING/WEIGHT LIFTING PROGRAM? IF YES, WHAT TYPE AND HOW OFTEN? Q17.

THANK YOU FOR FILLING OUT THE ABOVE MEDICAL HISTORY FORM

LUCKY'S SPORTS AND FITNESS COACHING PTY LTD AND THE WESTS+PLUS CRICKET ACADEMY IS NOT ABLE TO PROVIDE ANY INDIVIDUAL WITH MEDICAL ADVICE WITH REGARD TO ANY MEDICAL CONDITIONS THE INDIVIDUAL MAY HAVE AND THAT THIS INFORMATION IS USED ONLY AS A GUIDELINE TO THE LIMITATIONS OF THE PLAYERS ABILITY TO PARTICIPATE. THE INDIVIDUAL NEEDS TO UNDERSTAND THAT THIS PROGRAM DOES PRESENT AN ELEMENT OF RISK TO INJURY AND THEY SHOULD NOT HOLD THE COACHES LIABLE FOR ANY INJURIES THAT MAY OCCUR WHILE THEY ARE TRAINING.

ATHLETE/PLAYER SIGNATURE - OVER 18 _____

PARENT SIGNATURE - UNDER 18 PLAYER _____