

Ceyana Canoe Club
P.O. Box 4545
Edmonton (South), AB
T6E 5G4



Programs – Registration Form

Program: _____ Date(s): _____

Registrant(s): _____ Age _____

_____ Age _____

_____ Age _____

Club Member(s): Yes ___ No ___ Membership attached: Yes ___ No ___

Club Waiver on file: Yes ___ No ___ Club Waiver attached: Yes ___ No ___

Address: _____

Phone #: _____ E-Mail: _____

Fees: \$ _____ Collected: Yes ___ No ___ Cheque # _____ Cash ___ By: _____

Physical Activity Readiness Questionnaire:

If you are between the ages of 15 and 69, this PAR-Q below will tell you if you should check with your doctor before you start. If you are over 69 years of age, and are not used to being very active, definitely check with your doctor first.

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 your 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?

If you answered YES to one or more questions, talk with your doctor before you start becoming much more physically active.

If you answered NO to all questions, you can be reasonably sure that you can start becoming more physically active right now. Be sure to start slowly and progress gradually - this is the safest and easiest way to go.

Are there any health concerns (i.e. allergies) that should be brought to the instructor's attention? Yes ___ No ___

If yes, please explain: _____

Emergency Contact: _____ Hm Phone _____

Wk Phone: _____ Cell Phone: _____

**** On the back of this form please report on your relevant and/or prerequisite experience relevant to this program that you are registering for.****