



STUDENT HEALTH ASSESSMENT AND COURSE AGREEMENT FORM

This form relates to classes held at WEA Sydney where some form of mild physical activity is involved – Yoga, T'ai Chi, Alexander Technique, etc. It is to your benefit that your tutor is made aware of the health details that you list below.

PLEASE READ CAREFULLY, SIGN AND RETURN TO YOUR TUTOR AT THE FIRST CLASS

All WEA Health classes are safe and beneficial when practiced with full awareness. Every possible care will be taken by your tutor for your well-being but the tutor cannot be held responsible for improper practice at any time. Your tutor needs to be informed before class begins of any recent injury, ongoing ailment, surgery or commencement of pregnancy.

AGREEMENT *(to be signed by the student)*

I understand that the instructions given throughout classes are intended as a guide only. It is therefore my own responsibility to adjust any practice according to my limitations to ensure that no personal injury occurs. I hereby declare that I take full responsibility for myself during the classes.

Class title: _____ Class Code: _____

Print Name: _____ Date: _____

Signed: _____

Occupation: _____

Age: 16-20 21-35 36-46 47-57 58+

Please circle all current health problems:

back

neck

high / low blood pressure

joints

knees

recovering from surgery

pregnancy

N/A

(Use other side of page if necessary)

Please note: It is important that you inform your tutor of any changes in your health during the duration of your class. Also please heed the advice of your doctor or health practitioner if you have been advised to avoid certain practices or postures. If you have an ongoing specific medical problem, please obtain clearance from your doctor to undertake any exercise classes.