

Medical Clearance Form

Dear Doctor:

_____ name of applicant _____ phone of applicant

has applied for enrollment in the exercise programs at the YMCA. The exercise program is designed to start easy and become progressively more difficult over a period of time. A more detailed description of the exercise program is on the back of this form. Qualified personnel trained in conducting exercise tests and exercise programs will administer the exercise program.

By completing the form below, however, you are not assuming any responsibility for our administration of the exercise programs. If you know of any medical or other reasons why participation in the exercise program by the applicant would be unwise, please indicate so on this form.

If you have any questions about the YMCA exercise programs, please call.

Report of Physician

_____ I know of no reason why the applicant may not participate.

_____ I believe the applicant can participate, but I urge caution because

_____ The applicant should not engage in the following activities:

_____ I recommend that the applicant NOT participate.

Physician's signature _____ Date _____

Address _____ Telephone _____

City and State _____ Zip _____

Return to:

- | | | |
|---|---|--|
| <input type="checkbox"/> Mission Valley YMCA
5505 Friars Road
619-298-3576
Fax: 619-298-9262 | <input type="checkbox"/> Toby Wells YMCA
5105 Overland Avenue
858-496-9622
Fax: 858-496-8950 | <input type="checkbox"/> Hazard Center YMCA
7610 Hazard Center Drive #101
619-298-3576, ext. 2201
Fax: 619-295-1275 |
|---|---|--|

Attention: _____
Name

Program Name: _____
(i.e. Personal Training, Arthritis, etc)

Description of the YMCA Exercise Program

The YMCA exercise program for which the participant has applied is described as follows:

Exercise program—The purpose of the exercise program is to develop and maintain cardiorespiratory fitness, body composition, flexibility, and muscular strength and endurance. A specific exercise plan will be given to the participant based on needs and interests and your recommendations. The exercise program include warm-up, exercise at target heart rate, and cool-down (except for muscular strength and endurance training, in which target heart rate is not a factor). The program may involve walking, jogging, swimming, or cycling (outdoor and stationary); participation in exercise fitness, rhythmic aerobic exercise, or choreographed fitness classes; or calisthenics or strength training. All programs are designed to place a gradually increasing workload on the body in order to improve overall fitness and muscular strength. The rate of progression is regulated by exercise target heart rate and/or perceived effort of exercise.

In the exercise program, the reaction of the cardiorespiratory system cannot be predicted with complete accuracy. There is a risk of certain changes that might occur during or following exercise. These changes might include abnormalities of blood pressure and/or heart rate. YMCA exercise instructors are certified in CPR, and emergency procedures are posted in the exercise facility.

In addition to your medical approval and recommendations, the participant will be asked to sign informed consent forms that explain the risks of exercise participation before the program is initiated.