



## Pre Natal Questionnaire

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Current Client:  New client:

Phone: (H) \_\_\_\_\_ (Bus) \_\_\_\_\_

(Mobile) \_\_\_\_\_ (Fax) \_\_\_\_\_

Email: \_\_\_\_\_

D.O.B: \_\_\_\_\_ I am due on (or about): \_\_\_\_\_

Emergency contact name and no: \_\_\_\_\_

1. Is this your first child? YES  NO

If yes, please go to 3. If no, please continue at 2.

2. How many previous births: \_\_\_\_\_

Natural delivery \_\_\_\_\_ Caesarean delivery \_\_\_\_\_

Previous children's ages: \_\_\_\_\_

Did you experience any difficulty during your previous pregnancy/s? Please give details.

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Did you experience difficulties delivering your children? Please give details.

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Did your supervising doctor/mid-wife/obstruction/gynaecologist/practitioner make any recommendations regarding future pregnancies? \_\_\_\_\_

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3. General Health History: \_\_\_\_\_

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4. Please tick if there is any family history of the following:

Diabetes

High blood pressure

Difficult pregnancy

Difficult births

beyond movement studio

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If you have checked any of the conditions in Question 4 and/or if you have previously experienced difficulties with pregnancy or delivery, you will need to gain a written clearance from your doctor to continue Pilates. We will be glad to assist you with this.

5. Has your doctor cleared you to exercise during your pregnancy?

Yes:    Written                        Verbal                        Date of clear: \_\_\_\_\_

No                                        You will need to obtain clearance before the next session.

6. When continuing exercise during your pregnancy, please take note of the following responsibilities you have to help you and your baby stay fit, healthy and strong:

- i)            Do not increase the intensity of your current exercise regime.
- ii)           If you are not restricted by nausea please have eaten a light snack 30-60 minutes prior to exercising.
- iii)           Keep your heart rate below sub-maximum.
- iv)           Drink plenty of water.
- v)            Increase your caloric consumption of healthy foods.
- vi)           Tell your instructor immediately if anything causes discomfort.
- vii)           Keep your instructors informed of how you feel as you progress.
- viii)           You should not stretch to your full limits as the hormone "relaxin" can allow you to overstretch around the joints and cause a degree of injury.
- ix)           Trimester 2 & 3 you should not lie flat on your back for extended periods of time while exercising.

We will happily discuss any of the above points that you are not clear on. We will be guiding you through your workouts according to specific requirements of exercise during pregnancy. It is your responsibility to inform us of any changes, issues, injury, or conditions that may affect you doing exercise during your pregnancy. Please pay attention to how you feel and the recommendations that are made for you.

I, \_\_\_\_\_, agree that the information I have given on this document is true and correct. I have read, understood and accept all wording printed on this document. I take full responsibility for my actions whilst on the premises of Beyond Movement Studio while engaging in my workouts, classes, practice and use of equipment on the above premises. **I understand that I must and agree to give 24 hours notice for cancellation of bookings or full fee will be charged.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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