

MEDICAL CONSENT FORM



Please complete and return this form before commencing the Tai Chi class.

PROGRAM GUIDELINES

- Classes are open to any eligible person provided they are medically fit and can participate without assistance in the class.
- Classes last for 1 hour. Participants are encouraged to work within their own comfort zone at all times.
- The content of the program will largely follow the Tai Chi for health courses by Dr Paul Lam, a world recognized Tai Chi Master.
- The Tai Chi in these classes will consist of movements taken from the Sun (pronounced, Soon) style of Tai Chi, which is a gentle form of Tai Chi allowing for easy and effective movement.
- Each class will commence with a gentle warm up and conclude with a similarly gentle cool down.
- The actual movements in the form emphasizes slow, continuous and smooth movements focusing on body awareness, posture and body alignment.
- Participants will be encouraged to move in a way which is most comfortable to them.
- If you have any medical/health conditions (e.g. heart conditions, high/low blood pressure, respiratory conditions, diabetes, significant spinal/neck issues and/or joint replacements, vision or hearing difficulties) you are encouraged to seek advice from your doctor/other appropriate health care professional prior to starting the program. Please inform the Tai Chi instructor of any such conditions and work within their recommendations during class.

CONSENT

I acknowledge that I participate in the class at my own risk and it is my responsibility to obtain approval from my doctor/health professional for any medical/health conditions that may affect my safety or health during dance class.

I have read the Tai Chi program guidelines and I understand that there is an inherent risk in any exercise activities and I agree to abide by the rules set out in the program guidelines. I have no medical contradiction to participating in this class.

Signature of Participant:	Date
Participant name:	

