

INFORMED CONSENT TO TEST FORM

The tests included in the fitness evaluation will test some/all of the following areas of physical fitness: (1) cardio respiratory endurance, (2) body composition, (3) muscular strength/muscular endurance, and (4) flexibility.

The most physically demanding tests are the cardio respiratory and muscular strength/muscular endurance tests. The cardio respiratory test consists of one of the following methods: stepping up and down from a bench, cycling on a stationary bike or running/walking on a treadmill. The purpose is to examine your heart rate response to sub maximal exercise and recovery periods. The muscular strength/endurance test is push-ups and curl ups performed in one minute.

Muscular fatigue may be experienced during or after these tests. Complications have been few during exercise tests, especially those of a sub maximal nature. If the person exercising is not tolerating the test well, it is stopped. Reported complications (1 in 10,000 tests) include faintness and irregularities in heart function. Also, risk of injury getting on or off exercise equipment is possible but rare.

In signing this consent form, you acknowledge that you have read and understood the description of these tests and their complications. In addition, you state that any questions you have about the fitness evaluation have been answered to your satisfaction. Every effort will be made to ensure your health and safety. You enter into the tests willingly and may withdraw at any time if you are uncomfortable with any test procedure.

Information and data obtained from any test procedure will be treated as confidential. As such, that information and those data will not be released unless written authorisation is provided by you (the client) named below.

A doctors examination is recommended prior to testing for (1) all participants with any exercise restrictions and (2) all men >44 years old and all women >55 years old. Inspire2tri clients in either or both of these categories who do NOT have prior doctors' examination MUST acknowledge they have been informed of its importance.

By signing below, you accept full responsibility for your own health and well-being AND you acknowledge an understanding that no responsibility is assumed by Inspire2tri.

Participant's name (please print clearly) -----

Participant's signature -----

Date -----