MamaYoga Health Questionnaire

Thank you for taking the time to fill out this form. Please answer as accurately as possible, knowing that your answers will help our teaching team better ensure your comfort and enjoyment during class.

All information is confidential and collected in line with MamaYoga’s Privacy Notice which you can find at itsmamayoga.com

|  |  |
| --- | --- |
| Mums Name |  |
| Date of Birth |  |
| Babies Name |  |
| Date of Birth |  |
| Contact Number |  |
| Email Address |  |
| Emergency contact name |  |
| Emergency contact number |  |

Please fill in where relevant to you with a **YES** or **No** there is space at the end if you wish to give more details.

**Mums General Health (yes/no)**

|  |  |  |  |
| --- | --- | --- | --- |
| Recent surgery (speak to teacher) |  | Heart disorders |  |
| Epilepsy |  | Respiratory issues |  |
| Arthritis |  | Low/High blood pressure |  |
| Diabetes |  | Sensory impairment |  |
| Asthma |  | Spinal injury |  |
| Migraines |  | Other (speak to teacher |  |

**Delivery (Yes/No)**

|  |  |  |
| --- | --- | --- |
| First baby/second baby/third baby etc |  |  |
| Vaginal birth |  |  |
| C-section |  |  |
| Forceps |  |  |
| Ventous |  |  |
| Full term |  |  |
| Premature |  |  |
| Over due |  |  |

Is there anything else you would like MamaYoga to know? If so, please use the Space below the disclaimer.

|  |
| --- |
| ***Disclaimer***  *Please take care when filling in this questionnaire and check the contents are accurate before you submit it. By submitting the questionnaire, you are confirming that the contents are true and accurate to the best of your knowledge.*  *Your submission of this form will be taken to indicate your understanding and acceptance of the following.*  *Please notify your teacher of any changes to your and your babies responses in this healthcare questionnaire before participating in classes subsequent to those changes. Teachers at MamaYoga are not qualified to express an opinion that you or your baby are fit to safely participate in any of MamaYoga’s organised sessions. You must obtain professional or specialist advice from your doctor before participating if you are in any doubt. All of our yoga instructors are appropriately qualified or Accredited teachers, with high standards of teaching and best practice. Where possible, your teacher may offer suitable modifications or adjustments and practices to suit different levels of experience and ability. Please always let the teacher know before the class if this is your first time practicing yoga or if you are not confident about your experience and/or ability. Where you are taking part in live-streamed classes, please note that the instructor may not be able to see you at all times. Where you have declared a health condition, please contact the teacher before the class if you would like to request that you are provided with suitable modifications or adjustments wherever possible. You can do so at* [*mamayogacontact@gmail.com*](mailto:mamayogacontact@gmail.com)*.*  *Please note, where you are taking part in a pre-recorded class, you will not be able to request specific adjustments or modifications. In all classes whether face to face, live streamed remote or pre-recorded remote, always follow your teacher’s safety instructions and listen to your body. Where a movement or class is beyond your experience or ability, feels too difficult for you, or you experience any discomfort, please do not continue the movement or class*.  *MamaYoga (Grace Yoell) will take every precaution to ensure students’ health and safety as far as possible. However, each individual must take responsibility for their own and baby’s health and safety. While extremely rare, MamaYoga cannot and will not be held liable for any injury or death resulting from participation in these classes, allegedly or otherwise. You hereby absolve MamaYoga (Grace Yoell) of any and all claims relating to this, from yourself, your representatives and heirs, and any other person, company, organization or body.*  By signing this form you agree to all of the above.  Sign:  Date:    Any other information you would like to MamaYoga to know      Thank you for filling out this form, see you in class soon |