

WYSE COMMONS RECREATION CENTER

550 Haven Drive
Archbold, Ohio 43502

419-445-6313 ext. 55
www.fairlawnarchbold.com

Name _____ Birthday _____ Gender: __M __F
Street _____ City _____ State _____ Zip _____
Phone _____ Email address: _____ @ _____
Emergency Contact Person _____ Phone _____

HEALTH HISTORY

Have you consulted your doctor before beginning this exercise program? Yes _____ No _____

Known Health Problems:

Heart Problems (specify) _____

Respiratory Ailments (specify) _____

Do you have arthritis in any joints? Specify: _____

Any known degenerative bone or joint disease? Specify: _____

Recent fractures? _____

Joint replacements? _____

Current Medication:

Reason for medication:

Fairlawn will not be held liable for any accident, injury or illness incurred through participation in the aquatic or land exercise and fitness programs at Wyse Commons.

Signed: _____ **Date:** _____



*Inspiring a Positive
Life for Older
Adults*