
Fit for Training - Declaration

Required for Hands-on Practice of Techniques Taught in the SMART program

I am declaring that:

[] I have no physical injury(ies) or condition(s) that prevent me from doing the warm up and mobility activities or practice of techniques (e.g., neck, back, knee, respiratory).

or

[] I have a pre-existing injury(ies) or condition(s) that may limit my ability to perform the warm up and mobility activities or practice of techniques (e.g., neck, back, knee, respiratory).

In addition, I am declaring that:

If anything hurts while I am doing exercises on skills practice, I will stop immediately and notify my instructor or trainer.

I will immediately stop any activity when instructed to do so by the instructor, trainer or another participant in the group.

During practice of techniques, I will move slowly, careful and obvious.

While performing the techniques and moving slowly, I will try to make the moves as realistic as possible.

In each practice move I will communicate clearly with my partner, ensuring that we both understand who is simulating the primary worker and the second worker.

Name (print legibly in block letters)

Signature

Date

TO BE COMPLETED AT THE END OF THE TRAINING PROGRAM:

I declare that I have not sustained any injury(ies), nor have I aggravated a pre-existing injury(ies) or condition(s) as a result of this training.

Name (print legibly in block letters)

Signature

Date