

GP Referral Letter

Date:

Personal Trainer:

Dear Doctor

Your patient, _____ wishes to partake within an exercise program under my supervision

During the pre-exercise screening process (PAR-Q), the following points may be of concern to me:

-
-

Also during the health and fitness assessment the following areas were of concern to me:

-
-

I wish to tailor a training program to include some of the following types of exercise:

-
-

Could you please confirm that in your opinion, your patient, _____ is safe to exercise, or alternatively indicate any recommendations/restrictions that may be appropriate.

-
-

Yours Sincerely

Doctor: _____, has my approval to start a supervised exercise pro-	
Signed:	Date:
Address:	