

**Physical Activity Questionnaire**

Your local NHS organisation is developing a new physical activity programme called 'Health Fit'. In order to do this, we would like your help to tell us what activities you would like to see available in your local area. We would like the programme to be fun, sociable and rewarding and meet your needs. Please would you take the time to fill in this questionnaire. It will only take a few minutes to complete and then return the form to [Emily.robinson@southstaffspct.nhs.uk](mailto:Emily.robinson@southstaffspct.nhs.uk) or Anglesey House, Towers Business Park, Wheelhouse Road, Rugeley, WS15 1UL;

**Postcode**..... (First 4 letters/numbers only)

**Gender**      **Male / Female** (please circle)      **Age** .....

**1. In a typical week, how many times a day do you do 30 minutes or more of moderate intensity physical activity?** (Activity which increases your breathing, increases your heart rate and gives a general feeling of increased warmth)

0	1	2	3	4	5	5+

**2. What would encourage you to do more physical activity?**  
(Number your first three priorities 1 = first choice)

- |   |                          |                       |                          |
|---|--------------------------|-----------------------|--------------------------|
| Help with Childcare                                     | <input type="checkbox"/> | More Flexible Hours   | <input type="checkbox"/> |
| Reduced Costs   | <input type="checkbox"/> | Someone to support me | <input type="checkbox"/> |
| More local activities                                   | <input type="checkbox"/> | Single sex sessions   | <input type="checkbox"/> |
| More family activities                                  | <input type="checkbox"/> | 50+ Sessions          | <input type="checkbox"/> |
| Improved transport                                      | <input type="checkbox"/> | Other.....            | <input type="checkbox"/> |
| Sessions specifically for people wanting to lose weight | <input type="checkbox"/> |                       | <input type="checkbox"/> |

**3. What type of activities would you like to be available in your local area?**

**Dancing**

- Belly Dancing
- Line Dancing
- Salsa Dancing
- Ballroom Dancing
- Tea Dancing
- Other.....

**Fitness Classes**

- Aerobics/keep fit
- Yoga/Pilates
- Aqua Aerobics
- Toning Classes
- Thai Chi
- Chair Based Exercise
- Other.....

