Abington Police Department
215 Central Street
P.O. Box 2113
Abington, MA 02351-2113

Telephone (781)-878-3232
Fax (781)-982-2120

David G. Majenski
Chief of Police

Confidential Medical History

1. Date of most recent medical examination: _____

2. Do you feel fine – without restrictions? Yes _____ No _____
   If no, please describe: _____
   _____
   _____

3. Have you ever been hospitalized or treated for an injury? Yes ____ No _____
   If yes, please describe: _____
   _____
   _____

4. Have you ever been injured and not received medical attention? Yes ____ No _____
   If yes, please describe: _____
   _____
   _____

5. Do you have any current medical conditions (including pregnancy) for which you are being treated? Yes _____ No _____
   If yes, please describe: _____
   _____
   _____

6. Are you currently taking any prescribed medications? Yes _____ No _____
   If yes, please describe: _____
   _____
   _____

7. Do you have:
   Any known allergies? Yes _____ No _____
   Difficulty breathing? Yes _____ No _____
   High blood pressure? Yes _____ No _____
   Diabetes? Yes _____ No _____
   If yes, please describe: _____
   _____
   _____

8. How frequently do you exercise? _____
   What type of exercise? _____

9. Are you or have you ever been involved in self-defense or Martial Arts training?

   Yes _____ No_____
   If yes, please describe: _____
   _____
   _____

10. Please describe your perception of your current fitness level. _____
    _____

****The above information is complete, true, and accurate to the best of my knowledge****

_____ _____
Signature Instructor check