

# Netherthorpe and Upperthorpe GREEN GYM ORGANIC GARDENING FOR HEALTH SELF-ASSESSMENT

Your Name:

Male / Female

Address:

Phone / e-mail :

Age / date of birth:

Ethnic Origin:

1. How fit and physically active are you ?

2. Do you have any relevant illness, disability or special needs ?  
( Please declare information the guides may need to know:- e.g. Asthma /  
Anaphalactic Shock / Epilepsy / Diabetes / Heart Attack / Recent Injuries)

3. Do you have any experience of gardening / food-growing?  
Have you ever grown any food crops before?

4. What improvements to your health do you hope to get out of your  
visits to the allotments?

**Your answers will be treated as confidential and will only be read by the Guide.**