VITALITY

Co-funded by the European Union

Taking part in the workshop

Move together. A 2-hour workshop with the VITALITY toolkit.
Please read this, or ask us to read it with you.

Date _____ **Place** _____ **Organiser** _____

Taking part

- Taking part is your choice. It is free.
- We do light exercise, standing, or sitting if you prefer. Every exercise has an easier way.
- You can stop, rest or just watch at any time. You can leave at any time. You do not need to say why.

Before you take part

Read these points for yourself. You do not need to tell us your answers. You decide.

Talk to a health professional first if

Talk to a health professional before you start, or before you do more, if:

- a doctor has told you that you have a heart problem or high blood pressure
- a doctor has told you to be careful with exercise
- you have had chest pain, felt dizzy or fainted in the last 12 months
- you have a long-term health problem, such as diabetes or asthma
- you take medicine for a long-term health problem
- pain, swelling or an injury makes it hard to move
- you are pregnant, or you had a baby in the last few months

A health professional can be your doctor, nurse, midwife or physiotherapist.
If you have a cold or a fever, wait until you feel better.
If you are pregnant or had a baby recently, being active is still good for you. Ask your midwife or doctor what is right for you.

Photos, if you want

- We take a group photo only of the women who say yes. Taking part never depends on being photographed.
- The photo may be used to show the project's work, on the VITALITY website and in the project's reports to the European Union.
- You can change your mind at any time. Tell the organiser.

☐ **Yes, you may take my photo for this use.** ☐ **No photos of me, please.**

The group chat, if you want

- For four weeks after the workshop, the organiser posts one link from the toolkit each week in a group chat.
- Everyone in the chat can see your phone number. You can leave the chat at any time.

☐ **Yes, add me to the group chat. My phone number:** _____

☐ **No group chat for me.**

Your information

- On this form we ask only for your name, your signature and, if you want the group chat, your phone number. We do not ask about your health or where you come from.
- The organiser keeps this form safe until _____. Then it is destroyed.
- Questions about the VITALITY project: info@furim.no

I have read this, and I want to take part.

Name _____ **Signature** _____ **Date** _____

Co-funded by the European Union

Co-funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or the European Education and Culture Executive Agency (EACEA). Neither the European Union nor EACEA can be held responsible for them.

Free to use, share and adapt under Creative Commons Attribution-ShareAlike 4.0 International (CC BY-SA 4.0), except the EU emblem, partner logos, and third-party material marked as such. When you share or adapt it, credit: VITALITY project partners: FURIM INSTITUTT (Norway), MOBAD (Mobile Adventure, Poland) and Wellnesstech (Türkiye). Contains public sector information licensed under the Open Government Licence v3.0.