

DOCUMENT TO BE KEPT

Health Questionnaire “QS-SPORT – licencié mineur” for obtaining or renewing my sports licence ¹ - APPENDIX II-23 (Art. A. 231-3) of Code du Sport.

Decree No. 2021-564 of 7 May 2021 sets out the procedures for obtaining and renewing a licence from a sports federation. It requires the legal representatives of minor athletes to submit a certificate, after completing the following health questionnaire, established by order of 7 May 2021.²

This health questionnaire helps determine whether you need to provide a medical certificate to obtain or renew a sports licence for a minor athlete.

Warning to parents or legal guardians: This questionnaire should preferably be completed by your child, or in consultation with your child. It is your responsibility to ensure that the questionnaire is completed correctly and to follow the instructions according to the answers given.

"Doing sport is recommended for everyone." This is advice that you hear regularly. But have you talked to a doctor about it? Did the doctor examine you for medical guidance?
This questionnaire is not a test. You answer YES or NO. There are no right or wrong answers. You can look at your health record and ask your parents to help you.

You are a girl ☐ a boy ☐	Your age : years old
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Since last year :	YES	NO
Have you been in hospital for a whole day or several days? <i>Es-tu allé (e) à l'hôpital pendant toute une journée ou plusieurs jours ?</i>	☐	☐
Did you have surgery? / <i>As-tu été opéré (e)?</i>	☐	☐
Have you grown much more than in other years? <i>As-tu beaucoup plus grandi que les autres années ?</i>	☐	☐
Have you lost a lot of weight or gained a lot of weight? <i>As-tu beaucoup maigri ou grossi ?</i>	☐	☐
Did you get dizzy while doing sports? <i>As-tu eu la tête qui tourne pendant un effort ?</i>	☐	☐
Did you faint or fall without remembering what happened? <i>As-tu perdu connaissance ou es-tu tombé sans te souvenir de ce qui s'était passé ?</i>	☐	☐
Have you received one or more violent shocks that forced you to interrupt a sport session for a while? <i>As-tu reçu un ou plusieurs chocs violents qui t'ont obligé à interrompre un moment une séance de sport ?</i>	☐	☐
Did you find it harder to breathe during an effort than usual? <i>As-tu eu beaucoup de mal à respirer pendant un effort par rapport à d'habitude ?</i>	☐	☐
Did you find it very difficult to breathe after an effort? <i>As-tu eu beaucoup de mal à respirer après un effort ?</i>	☐	☐

Did you have chest pain or palpitations (heart beating very fast)? <i>As-tu eu mal dans la poitrine ou des palpitations (le cœur qui bat très vite) ?</i>	☐	☐
Have you started taking a new medicine every day for a long time? <i>As-tu commencé à prendre un nouveau médicament tous les jours et pour longtemps ?</i>	☐	☐
Did you stop doing sport because of a health problem for a month or more? <i>As-tu arrêté le sport à cause d'un problème de santé pendant un mois ou plus ?</i>	☐	☐

In the last couple weeks :	YES	NO
Are you feeling very tired? / <i>Te sens-tu très fatigué (e) ?</i>	☐	☐
Do you find it difficult to fall asleep or do you often wake up at night? <i>As-tu du mal à t'endormir ou te réveilles-tu souvent dans la nuit ?</i>	☐	☐
Do you feel less hungry? Do you eat less? <i>Sens-tu que tu as moins faim ? que tu manges moins ?</i>	☐	☐
Do you feel sad or worried? / <i>Te sens-tu triste ou inquiet ?</i>	☐	☐
Do you cry more often? / <i>Pleures-tu plus souvent ?</i>	☐	☐
Do you feel any pain or lack of strength because of an injury you suffered this year? <i>Ressens-tu une douleur ou un manque de force à cause d'une blessure que tu t'es faite cette année ?</i>	☐	☐

Today :	YES	NO
Do you ever think of stopping or changing to another sport? <i>Penses-tu quelquefois à arrêter de faire du sport ou à changer de sport ?</i>	☐	☐
Do you think you need to see your doctor to keep on practicing sport? <i>Penses-tu avoir besoin de voir ton médecin pour continuer le sport ?</i>	☐	☐
Is there anything else you would like to say about your health? <i>Souhaites-tu signaler quelque chose de plus concernant ta santé ?</i>	☐	☐

Questions for your parents to fill out :	YES	NO
Has anyone in your close family had a serious heart or brain disease, or died suddenly before the age of 50? <i>Quelqu'un dans votre famille proche a-t-il eu une maladie grave du cœur ou du cerveau, ou est-il décédé subitement avant l'âge de 50 ans ?</i>	☐	☐
Are you worried about your child's weight ? Do you think he is eating too much or too little? <i>Etes-vous inquiet pour son poids ? Trouvez-vous qu'il se nourrit trop ou pas assez ?</i>	☐	☐
Did you miss your child's scheduled health check-up at the doctor's office? (This medical examination is scheduled at ages 2, 3, 4, 5, between 8 and 9, between 11 and 13, and between 15 and 16.) <i>Avez-vous manqué l'examen de santé prévu à l'âge de votre enfant chez le médecin ? (Cet examen médical est prévu à l'âge de 2 ans, 3 ans, 4 ans, 5 ans, entre 8 et 9 ans, entre 11 et 13 ans et entre 15 et 16 ans.)</i>	☐	☐

If you answered YES to one or more questions, you should see a doctor to be examined and so they can attest that your health does not prevent you to take part in a unicycle competition (see health certificate model indescription). At the time of the visit, give him this questionnaire.

¹ In accordance with medical confidentiality, I will keep this personal medical information confidential and undertake to submit this certificate to the association to which I am applying for my sports licence.

² Decree of 7 May 2021 establishing the content of the questionnaire on the state of health of minor athletes.

**DOCUMENT TO BE SUBMITTED
TO THE RESPONSIBLE PERSON OF YOUR ASSOCIATION**

Certificate relating to “QS-SPORT – licencié mineur », for the purpose of obtaining or renewing a sports licence as of 9 May 2021³

As part of the application for a licence or licence renewal with the UNSLL,
I, (name/surname), legal
representative of the child,
(name/surname of the child) certify that they have completed the health
questionnaire and answered ‘no’ to all questions on the health questionnaire.

Saison 2025/2026, Club (Sports club name to be completed)

Made to serve and be valid as required by law.

Done at on/...../20.....

Signature (handwritten) :

³ With reference to Decree No. 2016-1157 of 24 August 2016 on medical certificates attesting to the absence of contraindications to practising sport.