# Pre-course questionnaire Singing for Lung Health

1. Full Name:

2. Area of residence:

3. Contact details:

4. Where you heard about the course:

5. Please detail your personal singing and/or musical experience:

6. Please tell us about your experience of teaching or leading generic group activities:

7. Please tell us about any experience of teaching or leading singing activities (1 to 1 or group, setting and age group):

8. Do you have any experience of living or working with people with chronic lung conditions? If so, please provide details of when and where (e.g. lived experience, primary or secondary care, exercise instruction, other):

9. Do you have (or have access to) a core repertoire of simple songs and warm up’s that can be taught by ear)?

10. Do you have any other additional musical skills (e.g. instrumentalist, composing, music therapy etc)?

11. Do you have a knowledge and understanding of vocal anatomy and physiology - and if so, what?

12. Please provide a few personal examples of if and how you incorporate bodywork and mindfulness into your life? This might include physical exercise and some kind of relaxation practice.

13. Why do you think Singing for Lung Health is important?

14. What would you like to gain from doing the course?

Please return the complete form to [phoene@themusicalbreath.com](mailto:phoene@themusicalbreath.com)