

Flexibility Test

Name _____

Period _____

Read the directions for each of the flexibility tests carefully. Perform each of the tests with a partner who can perform the measurements for you. Record each measurement to the nearest 1/4 inch on the chart below. Add up the total inches that you have and record in the space provided.

1. **Sit and Reach Test** (hamstrings and lower back) Sit on the mat or deck with you feet placed squarely on the sit and reach box. With your partner watching reach as far as you can pass your toes with your right hand as you partner records the score in inches. Repeat with your left hand. If the distance is under, (you can't reach your toes) record it as a minus number. If you reach past your toes, record it as a plus number. Exact reach is recorded as a zero.

2. **Right and Left Shoulder** Place one hand behind the back with palm facing outward. Place the other hand behind the head with palm facing the back. Try to touch the fingers. Record the a yes if you can touch your finger and a no if you cannot. Repeat by switching arm position.

3. **Trunk Lift** Lay flat on your stomach on the matt, deck or floor and place your hands on you back with your arm stright. Lift you head and chest up off the ground as far as your can. Record the number of inches you are able to raise you shoulders off the ground.

Flexibility Test	Week one	Week ten	Improvement
Sit and Reach Right			
Sit and Reach Left			
Right Shoulder			
Left Shoulder			
Trunk Lift			
Total Inches			