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Children's  
Leisure Activities Study  
(CLASS)

# Children's Leisure Activities Study Survey

## Parent Questionnaire

**PLEASE NOTE: THIS QUESTIONNAIRE WILL TAKE  
APPROXIMATELY 10 MINUTES TO COMPLETE**

Your child's name: \_\_\_\_\_

Your child's teacher: \_\_\_\_\_

The following questions relate to the child you have named on the front cover of the questionnaire.

**Which of the following PHYSICAL activities does your child USUALLY do during a typical WEEK? (from the start of the current school term, do NOT include school holidays)**

During a typical WEEK what activities does your CHILD usually do?	Does your child usually do this activity?	MONDAY - FRIDAY		SATURDAY - SUNDAY	
		How many times Monday-Friday?	Total hours/minutes Monday-Friday	How many times Saturday & Sunday?	Total hours/minutes Saturday & Sunday
Eg. Bike riding	No <sub>1</sub> Yes <sub>2</sub>	2	40mins	1	15mins
Aerobics	No <sub>1</sub> Yes <sub>2</sub>				
Dance	No <sub>1</sub> Yes <sub>2</sub>				
Calisthenics/gymnastics	No <sub>1</sub> Yes <sub>2</sub>				
Tennis/ bat tennis	No <sub>1</sub> Yes <sub>2</sub>				
Aussie Rules Football	No <sub>1</sub> Yes <sub>2</sub>				
Soccer	No <sub>1</sub> Yes <sub>2</sub>				
Basketball	No <sub>1</sub> Yes <sub>2</sub>				

CLASS PROXY-REPORT SURVEY: DO NOT DISTRIBUTE WITHOUT PERMISSION

During a typical WEEK what activities does your child usually do?	Does your child usually do this activity?	MONDAY - FRIDAY		SATURDAY - SUNDAY	
		How many times Monday-Friday?	Total hours/minutes Monday-Friday	How many times Saturday & Sunday?	Total hours/minutes Saturday & Sunday
Cricket	No <sub>1</sub> Yes <sub>2</sub>				
Netball	No <sub>1</sub> Yes <sub>2</sub>				
Baseball/softball	No <sub>1</sub> Yes <sub>2</sub>				
Swimming laps	No <sub>1</sub> Yes <sub>2</sub>				
Swimming for fun	No <sub>1</sub> Yes <sub>2</sub>				
Down ball/4 square	No <sub>1</sub> Yes <sub>2</sub>				
Tag/chasey	No <sub>1</sub> Yes <sub>2</sub>				
Skipping rope	No <sub>1</sub> Yes <sub>2</sub>				
Roller blading	No <sub>1</sub> Yes <sub>2</sub>				
Scooter	No <sub>1</sub> Yes <sub>2</sub>				
Skateboarding	No <sub>1</sub> Yes <sub>2</sub>				
Bike riding	No <sub>1</sub> Yes <sub>2</sub>				
Household chores	No <sub>1</sub> Yes <sub>2</sub>				

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During a typical WEEK what activities does your child usually do?	Does your child usually do this activity?	MONDAY - FRIDAY		SATURDAY - SUNDAY	
		How many times Monday-Friday?	Total hours/minutes Monday-Friday	How many times Saturday & Sunday?	Total hours/minutes Saturday & Sunday
Play on playground equipment	No <sub>1</sub> Yes <sub>2</sub>				
Play in the cubby house	No <sub>1</sub> Yes <sub>2</sub>				
Bounce on the trampoline	No <sub>1</sub> Yes <sub>2</sub>				
Play with pets	No <sub>1</sub> Yes <sub>2</sub>				
Walk the dog	No <sub>1</sub> Yes <sub>2</sub>				
Walk for exercise	No <sub>1</sub> Yes <sub>2</sub>				
Jogging or running	No <sub>1</sub> Yes <sub>2</sub>				
Physical education class	No <sub>1</sub> Yes <sub>2</sub>				
Sport class at school	No <sub>1</sub> Yes <sub>2</sub>				
Travel by walking to school (to and from school = 2 times)	No <sub>1</sub> Yes <sub>2</sub>				
Travel by cycling to school (to and from school = 2 times)	No <sub>1</sub> Yes <sub>2</sub>				
Other (please state) _____	No <sub>1</sub> Yes <sub>2</sub>				

CLASS PROXY-REPORT SURVEY: DO NOT DISTRIBUTE WITHOUT PERMISSION

During a typical WEEK what other leisure activities does your child <b>usually</b> do?	Do you usually do this activity?	<b>Total hours/minutes Monday-Friday</b>	<b>Total hours/minutes Saturday &amp; Sunday</b>
<b>E.G. TV/videos</b>	No <sub>1</sub> <b>Yes<sub>2</sub></b>	15hrs	6hrs 30mins
TV / videos	No <sub>1</sub> Yes <sub>2</sub>		
Playstation / Nintendo / computer games	No <sub>1</sub> Yes <sub>2</sub>		
Computer / Internet	No <sub>1</sub> Yes <sub>2</sub>		
Homework	No <sub>1</sub> Yes <sub>2</sub>		
Play indoors with toys	No <sub>1</sub> Yes <sub>2</sub>		
Sitting talking	No <sub>1</sub> Yes <sub>2</sub>		
Talk on the phone	No <sub>1</sub> Yes <sub>2</sub>		
Listen to music	No <sub>1</sub> Yes <sub>2</sub>		
Musical instrument	No <sub>1</sub> Yes <sub>2</sub>		
Board games/cards	No <sub>1</sub> Yes <sub>2</sub>		
Reading	No <sub>1</sub> Yes <sub>2</sub>		
Art & craft (eg. pottery, sewing, drawing)	No <sub>1</sub> Yes <sub>2</sub>		
Imaginary play	No <sub>1</sub> Yes <sub>2</sub>		
Travel by car / bus (to and from school)	No <sub>1</sub> Yes <sub>2</sub>		
Other (please state) _____	No <sub>1</sub> Yes <sub>2</sub>		