

# Family Health and Fitness Challenge

Monday, Sept. 26 – Monday, Oct. 10

## ENTER TO WIN THE FITNESS CHALLENGE!

Take part in Gunnison Valley Hospital's Family Health & Fitness Challenge Monday, Sept. 26, through Monday, Oct. 10.

Elementary-age children can enter to win a variety of prizes, including sporting equipment, bikes, scooters and helmets, just by being active with their families for two weeks.



### Here are the rules:

- In the next two weeks, starting Monday, Sept. 26, and ending Monday, Oct. 10, complete at least 10 family activities from the 25 listed on the back to be eligible for the drawing.
- Mark your progress each time you complete an activity by checking it off on the list. Have your parent/guardian sign the card when 10 activities are completed.
- Send your participation card to Liz Brown at Gunnison Valley Hospital (64 East 100 North, Gunnison, Utah 84634). Your card must be received by Friday, Oct. 14, to be considered.
- Prize winners will be notified the week of Oct. 17. A \$250 cash donation will also be given to the elementary school with the most participation cards submitted.



Compassion. Commitment. Community.

## RECORD YOUR PROGRESS HERE:

Mark each activity you completed with at least one of your family members. The activity must be done for at least 30 minutes.

|  |  |
|--|--|
| <input type="checkbox"/> Go for a hike                       | <input type="checkbox"/> Do yoga   |
| <input type="checkbox"/> Rake and jump in the leaves         | <input type="checkbox"/> Walk the dog  |
| <input type="checkbox"/> Play in a soccer game               | <input type="checkbox"/> Go for a swim   |
| <input type="checkbox"/> Compete in a running race           | <input type="checkbox"/> Play tennis   |
| <input type="checkbox"/> Play hop-scotch                     | <input type="checkbox"/> Go bowling  |
| <input type="checkbox"/> Play catch with a football          | <input type="checkbox"/> Play miniature golf                                     |
| <input type="checkbox"/> Go on a bike ride                   | <input type="checkbox"/> Ride a scooter  |
| <input type="checkbox"/> Build a fort                        | <input type="checkbox"/> Play a game of tag                                      |
| <input type="checkbox"/> Play Frisbee                        | <input type="checkbox"/> Go roller skating                                       |
| <input type="checkbox"/> Play catch with a baseball/softball | <input type="checkbox"/> Play jump rope  |
|  | <input type="checkbox"/> Other _____<br>(Tell us your creative fitness activity) |

STUDENT NAME (please print) \_\_\_\_\_ GRADE \_\_\_\_\_

CONTACT PHONE NUMBER \_\_\_\_\_

ELEMENTARY SCHOOL \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_