



The Town of Sahuarita and United Way of Tucson and Southern  
 Arizona present:  
**“The 2010 Sahuarita Get Fit Challenge”**  
**PARTICIPANT REGISTRATION AND ACTIVITY LOG**

Participant Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Date Started: \_\_\_\_\_ Date Completed: \_\_\_\_\_

*(Due on or before July 23, 2010. For more information visit [www.ci.sahuarita.az.us](http://www.ci.sahuarita.az.us)).*

**THE “CHALLENGE”**

**Between now and July 23 do at least 20 minutes of physical fitness activity at least 3 days per week (for youth under age 18) or at least 30 minutes of physical activity for at least 5 days per week (for adults, age 18+). The “Challenge” began on April 24 and ends on July 23.**

**Submit at least 1 week’s worth of activity logs attached to this sheet to the Town Hall no later than 5 p.m. on July 23, 2010.**

**Please submit your completed activity logs and this completed sheet to:**

The Town of Sahuarita  
 Attn: Debbie Summers  
 375 W. Sahuarita Center Way  
 Sahuarita, AZ 85629

**For more information, please visit: [www.ci.sahuarita.az.us](http://www.ci.sahuarita.az.us).**

**DISCLAIMER:** Before you start an exercise program, check with your healthcare provider if you are new to exercise, over 40, overweight, or a smoker; or if you have heart disease, high blood pressure, diabetes, arthritis, asthma, or any other medical condition that concerns you. Your healthcare provider can help you get started.

Make copies of this page as needed to complete logs for however long you participate.

<b>Week #</b> _____	<b>DATE:</b>	<b>ACTIVITY:</b>	<b># of MINUTES</b>
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
PARTICIPANT NAME: _____			
	<b>TOTAL:</b>		

<b>Week #</b> _____	<b>DATE:</b>	<b>ACTIVITY:</b>	<b># of MINUTES</b>
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
PARTICIPANT NAME: _____			
	<b>TOTAL:</b>		