Reset Form

NOTE: *Please save this form using your EIN and Month as the title.* **Example:** 123456June.pdf

Seasonal Fitness Challenge

Exercise Tracking Form

EIN: **Name:** **Tracking Month:**

Mail-Stop:

Total Activity Minutes: **(600 minutes per month minimum)**

Date:	Activity:	Minutes:
Day 1		
Day 2		
Day 3		
Day 4		
Day 5		
Day 6		
Day 7		
Day 8		
Day 9		
Day 10		
Day 11		
Day 12		
Day 13		
Day 14		
Day 15		
Day 16		

Date:	Activity:	Minutes:
Day 17		
Day 18		
Day 19		
Day 20		
Day 21		
Day 22		
Day 23		
Day 24		
Day 25		
Day 26		
Day 27		
Day 28		
Day 29		
Day 30		
Day 31		

Print Form

Submit by Email

wellness@pima.gov

Fax to: (520) 724 8150 **Mail to:** 150 W. Congress, 5th Floor **www.pima.gov/hr/health**

Forms are due to Employee Wellness by the **7th** of each month for the prior month to continue to be eligible for the Healthy Lifestyle Premium Discount and monthly drawings.

You may track your exercise minutes on a separate log, but will be required to enter your total minutes on Day 1 of this form each month to remain eligible for the Healthy Lifestyle Premium Discount #4. ***Please save all forms of exercise tracking records for auditing purposes.***