**Facility Logo Here**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your goal is to move at least 150 minutes this week and try new things!

Complete as many challenges in each area of the 6 Pillars of a Healthy Lifestyle as you’d like. Activities do not have to be completed in order.

Include your rules/instructions here.

Be sure to state when the card must be turned in and where.

Will you offer a prize? Include that info too!

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| **Nutrition** | **Physical Activity** | **Stress Management** | **Restorative Sleep** | **Social Connection** | **Avoid Risky Substances** |
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**Medical Fitness Week Challenge Card**