

JULY 2018

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1 Select new health goal (one that you can add with one next month)	2 60 sec plank	3 30 push ups	4 Happy Independence day! Participate In 2 Street Games	5 40 Squats	6 Get 10,000 Steps today	7 40 Mountain climbers
8 50 crunches	9 2 mins of jump rope *Summercise Session 2 starts*	10 30-sec wall sit	11 Breakfast Wednesday at KNOM from 830a-10a	12 Donate to the Nome Food Bank (canned or shelf stable foods)	13 30 min cardio (inside/outside)	14 15 jumping jacks 15 push ups 15 squats Repeat 3 times!
15 Skip soda, coffee, and/or tea for the day!	16 Take a 30 minute walk after dinner	17 30 push ups 30 sec. wall sit Repeat 2 times!	18 Drink at least two 8-ounce glasses of water	19 20 squats 20 jumping jacks 10 burpees Repeat 2 times!	20 Cook your favorite vegetable in a new way – roast, steam, bake, or sauté!	21 Make a grocery list for next week and get your shopping done!
22 Meal prep 2 meals for this week!	23 Practice Meatless Monday! Try beans or tofu in place of your usual protein	24 Skip sugar, honey, and/or creamer in your tea or coffee	25 Breakfast Wednesday at KNOM from 830a-10a	26 Go for a walk on the beach! *Last Day of Session 2*	27 60 sec plank 20 squats 30 sec wall sit Repeat twice!	28 Wyatt Earp Dexter Challenge@930am at Old St. Joe's Parking Lot
29 Take a hike! Head out to Anvil Mountain	30 Enjoy a salad for lunch or dinner	31 Donate to the Nome Food Bank (canned or shelf stable foods)				

Name _____ Date of Birth _____

Guardian's name (If under 18)

Your Community: _____

Phone Number _____ Address _____

30 Day Fitness Challenge Rules

- 1. Complete exercise/activity designated for each day of the month.**
- 2. You do not have to complete the exercises all at one time. For example: You can complete 15 mountain climbers in the morning of that day and 20 in the evening of that same day.**
- 3. Participants under 18 years old must get a parent or guardian to sign the calendar.**
- 4. Return completed calendar to CAMP to receive a prize.**

I understand and accept the element of risk of physical injury through participation in the 30 Day Fitness Challenges. I further understand there is no medical insurance provided by the Norton Sound Health Corporation or its employees, volunteers, and sponsors for this program. I will assume all risks and I am aware that I shall be responsible for any and all medical costs that may arise from injury through participation in this program as well as any other unforeseen costs that could arise.

I release Norton Sound Health Corporation from any and all liability, loss, damage, costs, claims or causes of action including but not limited to property damage or bodily injuries that may arise from this activity.

(Participant or Parent/Guardian signature)

Date



Please return completed calendars to NSHC CAMP office or
email Kim Gray kgray@nshcorp.org
Questions: Call 443-3365



**NORTON SOUND
HEALTH CORPORATION**