

Walk Around the Sound Registration

Have you ever wanted to tour all the villages of Norton Sound? Now you can! Join the CAMP department today!

FROM → TO	MILES
Nome → Savoonga	163
Savoonga → Gambell	39
Gambell → Teller	190
Teller → Brevig Mission	7
Brevig Mission → Wales	50
Wales → Little Diomedede	25
Little Diomedede → Shishmaref	87
Shishmaref → Koyuk	168
Koyuk → Shaktoolik	40
Shaktoolik → Unalakleet	35
Unalakleet → Stebbins	52
Stebbins → St. Michael	7.7
St. Michael → Elim	79
Elim → Golovin	24
Golovin → White Mountain	15
White Mountain → Nome	61

Who: YOU! Anyone can participate. Participants under 18 years old must get a parent or responsible adult to sign the registration form.

What: This virtual “tour” of Norton Sound kicks off in Nome and covers 1,043 miles. While you won’t actually be walking to these villages, 30 minutes of physical activity will equal 10 miles of virtual miles along the trail. For each village you reach, you win a button! The first 3 participants to complete the 2018 Walk Around the Sound challenge will receive a medal.

How: Record your physical activity in minutes on the tracking sheet on the back. Forms are available at the CAMP Department and on the NSHC CAMP Webpage. Turn in your tracking sheet to the CAMP department or email to kgray@nshcorp.org. *Electronic forms available on the NSHC CAMP Webpage if preferred.

Where: Wherever you want; any intentional physical activity that gets your body moving counts! Examples include: walking to work, walking the dogs outside, running on a treadmill, or playing basketball with your friends. Please have someone certify your physical activity completed.

When: March 2018 – December 2018

Name _____ Guardian’s name (If under 18) _____

Email _____ Date of Birth _____

Phone Number _____ Mailing Address _____

Person Agreeing to Certify Physical Activity _____

I understand and accept the element of risk of physical injury through participation in the Walk Around the Sound. I further understand there is no medical insurance provided by the Norton Sound Health Corporation or it’s 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

PUBLICITY RELEASE: I hereby grant NSHC CAMP the right to use my name/ image/ testimonial in news releases, feature articles, advertisements and promotional efforts.

(Participant or Parent/Guardian signature)

Date

Please return this registration form to the NSHC CAMP Office
(Hospital 1st Floor) or email it to kgray@nshcorp.org.
Questions: Call 443-3365



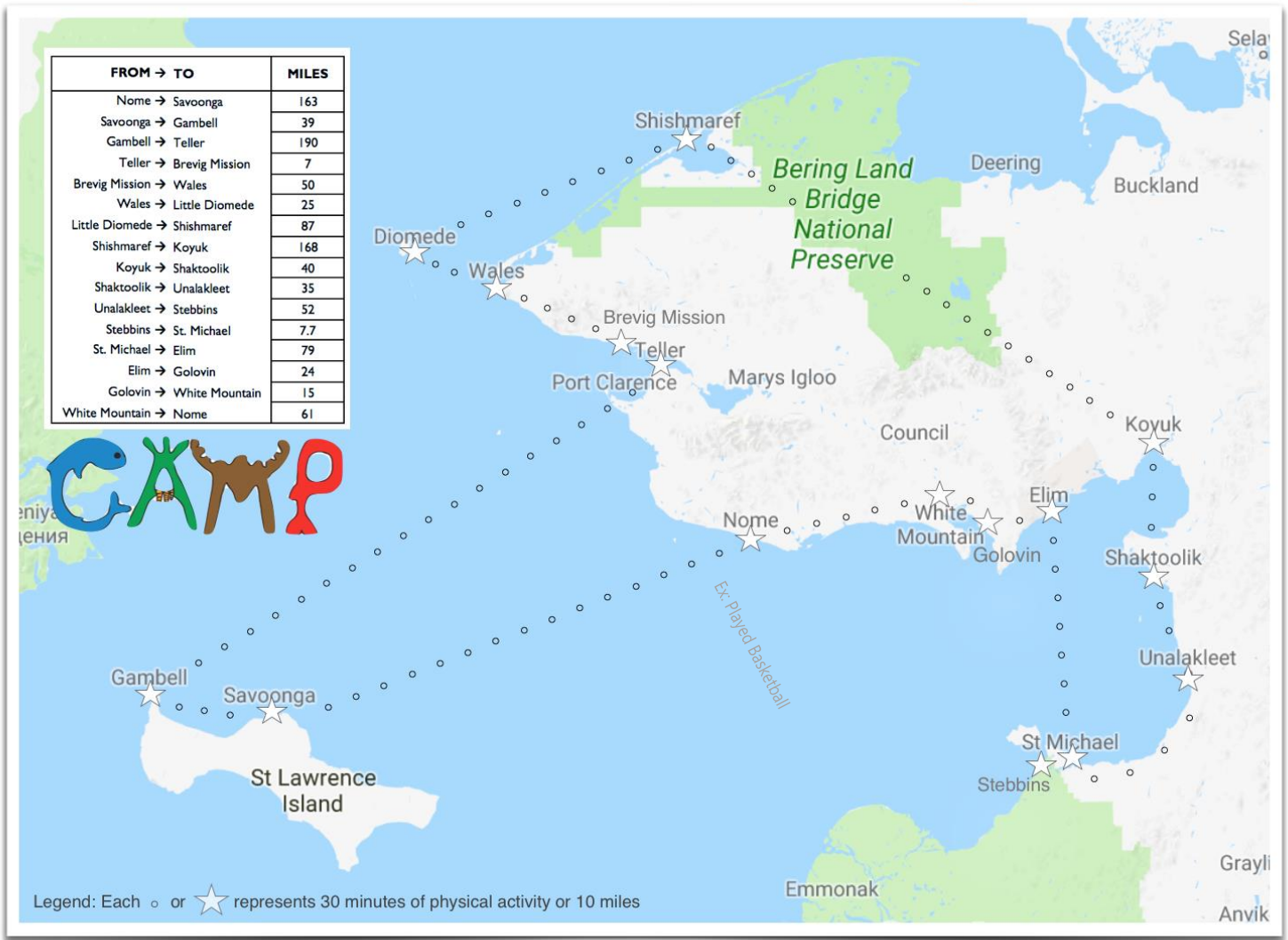
Walk Around the Sound Activity Tracking Sheet

Name: _____

Signature of Person Certifying Physical Activity : _____

Please use the map below to record your activity by filing in each circle or star after completing 30 minutes of intentional physical activity. We encourage you to write the completed activity at each symbol.

Walk Around the Sound



Please return form to the NSHC CAMP Office (Hospital 1st Floor) or email it to kgray@nshcorp.org.
 Report weekly, monthly or when this form is completed.
 Questions: Call 443-3365