# Resolution Staywell

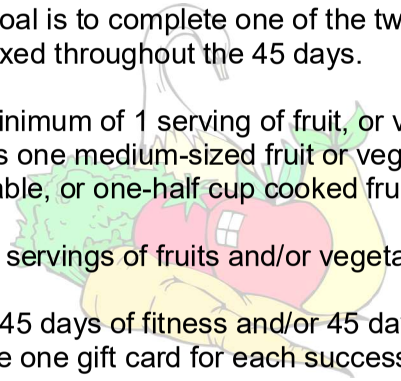
This program consists of two parts: **Fitness and Nutrition**. Receive a $15 gift card for each challenge that is completed. You may do one or both.

**Fitness** – The goal is to improve fitness.

Option 1 Complete 45 days of fitness (exercise can be 30 minutes per day of walking, jogging, weight lifting, biking, exercise machines, exercise videos, or similar routines). Thirty minutes can be broken into three 10-minute segments per day. However, the total must be 30 minutes per day to count. The days do not need to be consecutive.

Option 2: Complete 1000 minutes of exercise. Do not count more than 60 minutes per day.

**Nutrition** – The goal is to complete one of the two options. These options can be mixed throughout the 45 days.



Option 1: Eat a minimum of 1 serving of fruit, or vegetable, with each meal. A serving is one medium-sized fruit or vegetable, or one cup of raw fruit or vegetable, or one-half cup cooked fruit or vegetable.

Option 2: Eat 300 servings of fruits and/or vegetables.

After completing (45 days of fitness and/or 45 days of nutrition), submit the form to receive one gift card for each successful completed activity.

BONUS: If half of the participation minutes are completed in the IPSC Staywell Center, or any other IPSC approved exercise equipment area, when signed in, you will receive another $15 gift card.

**Program begins January 8, 2024.**

Charts are only a reference. You may adapt as needed or use an app to track.

Name: _____

## Fitness Chart

| Week | Sun | Mon | Tues | Wed | Thur | Fri | Sat |
|---|---|---|---|---|---|---|---|
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |
| 6. | | | | | | | |
| 7. | | | | | | | |
| 8. | | | | | | | |
| 9. | | | | | | | |
| 10. | | | | | | | |
| 11. | | | | | | | |

Place a check mark for each day you exercise 30 minutes or more or record total minutes, not to exceed 60 minutes in a day.

## Nutrition Chart

A minimum of five days for eight weeks is required to qualify.

| | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 |
|---|---|---|---|---|---|---|---|---|---|---|
| Sun | | | | | | | | | | |
| Mon | | | | | | | | | | |
| Tues | | | | | | | | | | |
| Wed | | | | | | | | | | |
| Thurs | | | | | | | | | | |
| Fri | | | | | | | | | | |
| Sat | | | | | | | | | | |