

## Take Action! Program August 20, 2007 to October 12, 2007

Employee Name \_\_\_\_\_

Program

Congratulations! You have met your goal and completed the eight-week Take Act Program and are eligible for a \$10 gift certificate to one of the stores listed bel Please check the box next to the certificate you wish to have as a reward for y accomplishment.	ow.
Bath & Bodyworks	
Regal Movie Tickets	
Robeks □	
Sports Authority	
Sweet Tomatoes	
Trader Joes	
Return this form to the Human Resources Office no later than October 19, 2007. The Human Resources Office will call you once they have received and process your request. Our next session will begin on November 5, 2007.  Prize Received	sed
Signature Date	

## Take Action! Fruit & Vegetable/Physical Activity Log

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Record your information on this form	The starting minimum go	hal is 3 servings her day and o

**Employee Name** 

Record your information on this form. The starting minimum goal is 3 servings per day and one type of exercise/physical activity for 20 minutes per day (60 minutes per week). Please put an "X" in the box for each serving consumed and 20 minute exercise completed.

Week	Туре	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
1	Fruits/Vegetables							
	Physical Activity							
	Fruits/Vegetables							
2	Physical Activity							
3	Fruits/Vegetables							
3	Physical Activity							
	Fruits/Vegetables							
4	Physical Activity	1 1				1 1		
_	Fruits/Vegetables							
5	Physical Activity							
	Fruits/Vegetables							
6	Physical Activity							
7	Fruits/Vegetables							
,	Physical Activity							
8	Fruits/Vegetables							
	Physical Activity							

**Employee Signature** ( I completed the above documented amount of physical activity and consumed the above documented amount of fruits & vegetables.)