

Name _____ Department _____ Start Date _____

2021 Winter Fitness Challenge: Mark the challenge you are completing. Challenge is six consecutive weeks. End Date _____

Save Your Moola: Track your spending/savings. Personal Goal: _____

Stay Hydrated: Track your water intake/ditch the soda. Personal Goal: _____

Return this activity log to the Commissioners' Office or wellness@woodcountyohio.gov within seven days of completing the challenge.

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
WEEK 1							
WEEK 2							
WEEK 3							
WEEK 4							
WEEK 5							
WEEK 6							