

OCTOBER 2024 CHALLENGE

NAME _____

RUN OR WALK TWO MILES A DAY FOR 30 DAYS. VERIFY ENTRIES WITH AN ATTENDANT AT THE JIM THORPE FITNESS CENTER FRONT DESK.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1 <input type="checkbox"/> RUN/WALK TWO MILES	2 <input type="checkbox"/> RUN/WALK TWO MILES	3 <input type="checkbox"/> RUN/WALK TWO MILES	4 <input type="checkbox"/> RUN/WALK TWO MILES	5 <input type="checkbox"/> RUN/WALK TWO MILES
6 <input type="checkbox"/> RUN/WALK TWO MILES	7 <input type="checkbox"/> RUN/WALK TWO MILES	8 <input type="checkbox"/> RUN/WALK TWO MILES	9 <input type="checkbox"/> RUN/WALK TWO MILES	10 <input type="checkbox"/> RUN/WALK TWO MILES	11 <input type="checkbox"/> RUN/WALK TWO MILES	12 <input type="checkbox"/> RUN/WALK TWO MILES
13 <input type="checkbox"/> RUN/WALK TWO MILES	14 <input type="checkbox"/> RUN/WALK TWO MILES	15 <input type="checkbox"/> RUN/WALK TWO MILES	16 <input type="checkbox"/> RUN/WALK TWO MILES	17 <input type="checkbox"/> RUN/WALK TWO MILES	18 <input type="checkbox"/> RUN/WALK TWO MILES	19 <input type="checkbox"/> RUN/WALK TWO MILES
20 <input type="checkbox"/> RUN/WALK TWO MILES	21 <input type="checkbox"/> RUN/WALK TWO MILES	22 <input type="checkbox"/> RUN/WALK TWO MILES	23 <input type="checkbox"/> RUN/WALK TWO MILES	24 <input type="checkbox"/> RUN/WALK TWO MILES	25 <input type="checkbox"/> RUN/WALK TWO MILES	26 <input type="checkbox"/> RUN/WALK TWO MILES
27 <input type="checkbox"/> RUN/WALK TWO MILES	28 <input type="checkbox"/> RUN/WALK TWO MILES	29 <input type="checkbox"/> RUN/WALK TWO MILES	30 <input type="checkbox"/> RUN/WALK TWO MILES	31 <input type="checkbox"/> RUN/WALK TWO MILES		

TOTAL NUMBER OF DAYS _____

