

# Holiday WELLNESS CAMPAIGN CHALLENGE

Please complete this form entirely to help us describe your company/wellness program. Please return to [utahworksitewellnesscouncil@gmail.com](mailto:utahworksitewellnesscouncil@gmail.com) with supporting materials by **December 18<sup>th</sup>**.

## COMPANY INFORMATION

Employee Name	_____	Employee Position	_____
Employee Email	_____	Company Name	_____
Company Size	_____	Company Industry	_____
Multiple Locations?	_____		
How long have you had a wellness program?	_____		
How many employees run your wellness program?	_____		

## CHALLENGE DETAILS

Describe the challenge in a brief paragraph:

How many employees participated? \_\_\_\_\_

How did you promote the wellness challenge? \_\_\_\_\_

How much time did you put into running the challenge? \_\_\_\_\_

How much did it cost to run the challenge? \_\_\_\_\_

What incentive did you offer if any? \_\_\_\_\_

What would you change if you ran the same challenge again? \_\_\_\_\_

Describe your communication timeline for the challenge:

## PARTICIPANT FEEDBACK

What did your employees enjoy about this challenge?

What would they like to see different?



**Are you ready for some....**

# **Fit Bowl!!**

**Sep. 22nd - Nov. 24th**

## **Rules**

- 1 min of exercise = 1 yard
- 10 yards = 1st down
- 6 - 1st downs = TOUCHDOWN (60 min.)
- Email Team Leader every week number of touchdowns/1st downs you earn
- **Fumble!** You have 1 week grace with no exercise, after that for every week you do not exercise, your team loses a touchdown.

## **Game On!**



CORPORATE  
WELLNESS

Team Captains are responsible for obtaining number of touchdowns from each player every

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7
Team 1							
Team 2							
Team 3							

week and turn it into the health coach to update this spreadsheet.

Week 8	Total Touchdowns
	0
	0
	0