



100 Miles in 100 Days Walking Challenge

Individual Walking Log

Participant Name: (please print) _____

For the period _____ to _____

*To be in the prize drawing, mail in your completed log by **May 1, 2012** to:*

RMHS, Attn: WalkRutland, 78 So. Main Street, Rutland, VT 05701

Day	Date	Distance	Notes
1	16-Jan		
2	17-Jan		
3	18-Jan		
4	19-Jan		
5	20-Jan		
6	21-Jan		
7	22-Jan		
8	23-Jan		
9	24-Jan		
10	25-Jan		
11	26-Jan		
12	27-Jan		
13	28-Jan		
14	29-Jan		
15	30-Jan		
16	31-Jan		
17	1-Feb		
18	2-Feb		
19	3-Feb		
20	4-Feb		
21	5-Feb		
22	6-Feb		
23	7-Feb		
24	8-Feb		
25	9-Feb		
26	10-Feb		

Day	Date	Distance	Notes
27	11-Feb		
28	12-Feb		
29	13-Feb		
30	14-Feb		
31	15-Feb		
32	16-Feb		
33	17-Feb		
34	18-Feb		
35	19-Feb		
36	20-Feb		
37	21-Feb		
38	22-Feb		
39	23-Feb		
40	24-Feb		
41	25-Feb		
42	26-Feb		
43	27-Feb		
44	28-Feb		
45	29-Feb		
46	1-Mar		
47	2-Mar		
48	3-Mar		
49	4-Mar		
50	5-Mar		You are halfway there!
51	6-Mar		
52	7-Mar		
53	8-Mar		
54	9-Mar		
55	10-Mar		
56	11-Mar		
57	12-Mar		
58	13-Mar		
59	14-Mar		
60	15-Mar		
61	16-Mar		
62	17-Mar		
63	18-Mar		
64	19-Mar		
65	20-Mar		
66	21-Mar		
67	22-Mar		
68	23-Mar		
69	24-Mar		

Day	Date	Distance	Notes
70	25-Mar		
71	26-Mar		
72	27-Mar		
73	28-Mar		
74	29-Mar		
75	30-Mar		
76	31-Mar		
77	1-Apr		
78	2-Apr		
79	3-Apr		
80	4-Apr		
81	5-Apr		
82	6-Apr		
83	7-Apr		
84	8-Apr		
85	9-Apr		
86	10-Apr		
87	11-Apr		
88	12-Apr		
89	13-Apr		
90	14-Apr		
91	15-Apr		
92	16-Apr		
93	17-Apr		
94	18-Apr		
95	19-Apr		
96	20-Apr		
97	21-Apr		
98	22-Apr		
99	23-Apr		
100	24-Apr		Mail in your log by May 1

Please tally up your miles and enter the final number below:

TOTAL Miles: _____

*This walking log must be completed and **mailed in by May 1** to:*

RMHS, Attn: WalkRutland, 78 So. Main Street, Rutland, VT 05701

Would you please take the following short survey?

1. **How many years have you participated in the 100 Miles in 100 Days Walking Challenge?**

(Circle one) 1 2 3

2. **What benefits have you noticed as a result of this walking challenge?**

Health Emotional Less stress Economic

Other (please specify) _____

3. **Are you participating in additional physical activities (besides walking) as a result of this challenge?**

Yes No

4. **Will you continue to walk on a regular basis now that the challenge is completed?**

Yes No

5. **Did you lose weight during this walking challenge?**

No Yes

If yes, how many pounds? _____ (this helps us get more accurate data)

We'd appreciate any additional comments or feedback: