



# BINGO


Write the dates completed in each box and a very simple description of what you did. Award your total points at the bottom of this sheet.

Turn this in to your local representative.


 Cardio at least 30 minutes 3 different days

 Drink 8, 8oz glasses of water

 30 minutes of "outdoor" activity in a given day


 Eat a raw (not cooked) meal.  
(salad, fruit, veggies, nuts, berries)


 30 minutes of outdoor activity in a given day

 Cardio at least 30 minutes 3 different days


 Strength Training at least 20 minutes 3 different days

 Drink a Green Smoothie 3 times


 Eat a raw (not cooked) meal.  
(salad, fruit, veggies, nuts, berries)


 Drink 8, 8oz glasses of water


 Cardio at least 30 minutes 3 different days

 Strength Training at least 20 minutes 3 different days

 Drink a Green Smoothie 3 times

 Strength Training at least 20 minutes 3 different days

 Drink 8, 8oz glasses of water

 Cardio at least 30 minutes 3 different days

Name: \_\_\_\_\_ Total Points: \_\_\_\_\_