4-H State Leadership Conference: Wellness Challenge

Have fun and take part in the Wellness challenge by completing 9-10 activities each day, totaling up to 36-40 activities during the conference. Make sure to mark all the activities you have completed and to return the form at the end of the conference. The first 100 completed challenges receive a prize!

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activities | Thu(7/23) | Fri(7/24) | Sat(7/25) | Sun(7/26) |
| Nutrition |  |  |  |  |
| Did you eat 4 servings of fruit and vegetables? |  |  |  |  |
| Did you choose whole grains when you had the option? |  |  |  |  |
| Did you choose any type of milk instead of sugar sweetened beverages?(soy, almond or rice milk are alternative foods) |  |  |  |  |
| Did you drink water throughout the day? |  |  |  |  |
| Can you identify three locations where water is available? |  |  |  |  |
| Other:  |  |  |  |  |
| Food Safety |  |  |  |  |
| Did you wash your hands with soap and water before eating? |  |  |  |  |
| Other: |  |  |  |  |
| Healthy Lifestyle |  |  |  |  |
| If you sneezed, did you sneeze into your elbow? |  |  |  |  |
| Did you sleep at least 9 hours?(at night, NOT during sessions) |  |  |  |  |
| Did you brush your teeth? |  |  |  |  |
| Did you floss your teeth? |  |  |  |  |
| Did you apply sunscreen? |  |  |  |  |
| Did you take part in a physical activity of your choice (walking, running, yoga etc.)? |  |  |  |  |
| Other: |  |  |  |  |
| Emotional Health |  |  |  |  |
| Did you take time for reflection? |  |  |  |  |
| Were you focused during the sessions? |  |  |  |  |
| Did you meet a new friend? |  |  |  |  |
| Did you call a loved one? |  |  |  |  |
| Did you perform a random act of kindness? |  |  |  |  |
| Did you listen and offer support to someone in need? |  |  |  |  |
| Other:  |  |  |  |  |