

Walk Across Tennessee!

Wrap-Up

(To be completed at the end of the competition)

Name:	Team Name:
Phone #:	

Directions

- ◆ Fill out this form **after** you've finished *Walk Across Tennessee*.
- ◆ Send, FAX, or take this form along with your **Individual Mileage Log** to your Team Captain.
- ◆ Ask your Team Captain about the time and location for the Celebration and Recognition Activity where awards and prizes will be presented!

Which of these fitness activities do you do now? (Circle all that apply)

I do no fitness activity now

Swim

Walk

Ride bicycle

Run

Other (specify) _____

If you do a fitness activity now, please indicate how many days each week you perform the activity(ies) checked above.

Walk _____ days each week

Ride bicycle _____ days each week

Run _____ days each week

Other activity _____ days each week

Swim _____ days each week

Write the number of minutes each day you perform the activity(ies) checked above.

Walk _____ minutes each day

Ride bicycle _____ minutes each day

Run _____ minutes each day

Other activity _____ minutes each day

Swim _____ minutes each day

Please let us know what you thought about *Walk Across Tennessee!* (Circle all that apply)

Got me started exercising

Helped me motivate my friends and/or family to walk

Increased the amount of exercise I was already doing

Increased my energy

Helped me to find a group to walk with

Kept me going when I felt like quitting

Helped me feel less stressed

Increased the time I spent with my family

Decreased the amount of time I spent sitting and doing things like watching television.

What did *Walk Across Tennessee* do for you and/or your family? _____

What did you like most about *Walk Across Tennessee*? _____

How did you learn about *Walk Across Tennessee*? (Circle all that apply)

Extension Service

Radio or television

Friend, family or coworker

Walk Across Tennessee Flyer

Newspaper

Other (specify) _____