

**First Annual National Native American Health and Fitness Day
Health Promotion/Disease Prevention Initiative**

Congratulations to your community for participating in this first annual event! Please take a few minutes to tell us about your event by completing this short form. That way we can summarize how many Indian communities are “just moving it” to enjoy better health and fitness.

Please return this form by mail to Just Move It, HP/DP Department, Hwy 491, P.O. Box 160, Shiprock, NM 87420 or by e-mail to: justmoveit@shiprock.ihs.gov.

Tribal/Urban Community: _____
(Tribal affiliation, Urban city, town)

Date of Event: _____

Location of Event: _____
(school, recreation center, chapter house, senior center, etc.)

Type of Event:

- Walk/Run Distance: _____
- Aerobics Class
- Dancing - Country Western line dancing, etc.
- Health Fair/Workshop and Physical Activity
- Other Event (please describe) _____

Number of Participants: _____

Contact Person: _____ Phone: _____

Please add any comments and suggestions you have about this event.

THANK YOU!

National Native American Health & Fitness Day

Wellness Walk with Tribal Leaders



**Come walk with our leaders
as they show our
commitment to wellness.
Walk the Talk!**

Our Local Wellness Walk will take place on:

At:

Location:

For more information contact:



NCAI

IHS Health Promotion



JUST MOVE IT

