

2024

HEALTHY SHASTA WALKS PASSPORT



A NEW WALK OF YOUR CHOICE _____ WHERE	WALK AFTER YOU EAT _____ DATE	TAKE A MINDFUL WALK TO BE PRESENT & REDUCE STRESS _____ DATE	WALK WITH A FRIEND OR FURRY FRIEND _____ DATE	WALK 10,000 STEPS IN ONE DAY (TRACK W/ YOUR PHONE OR PEDOMETER) _____ DATE
TAKE A WALK BREAK FOR 10 MINUTES OR MORE _____ DATE	FIND TWO DIFFERENT BIRDS ON YOUR WALK _____ DATE	WALK TO A PHOTO-WORTHY SPOT AND TAKE A PICTURE _____ DATE	TAKE A WALK IN THE MOONLIGHT _____ DATE	START THE DAY WITH A WALK & END THE DAY WITH A WALK _____ DATE
ENJOY A WALK AT SUNSET OR SUNRISE _____ DATE	WALK IN THE RAIN OR WIND _____ DATE	WALK WITHOUT ELECTRONICS _____ DATE	WALK TO PICK UP LITTER _____ DATE	
WALK IN YOUR NEIGHBORHOOD _____ WHERE	WALK TO VIEW PUBLIC ART _____ WHERE	WALK ACROSS A BRIDGE _____ BRIDGE	WALK TO IMMERSE YOURSELF IN THE BEAUTY OF NATURE _____ WHERE	TAKE A HIKE & CHECK OUT 52HIKECHALLENGE.COM _____ TRAIL
TRY A WALK LISTED ON HEALTHYSHASTAWALKS.ORG _____ WHICH ONE	WALK TO A SCHOOL _____ SCHOOL	WALK TO LEARN SOMETHING NEW _____ WHERE	WALK TO A WATERFALL _____ WATERFALL	WALK IN A CULTURAL DISTRICT OR IN A DOWNTOWN _____ WHICH ONE

START THE NEW YEAR WALKING!

COMPLETE THE HEALTHY SHASTA WALKS PASSPORT ANYTIME BETWEEN
JANUARY 1 – FEBRUARY 29, 2024.

SUBMIT YOUR PASSPORT BY MARCH 1, 2024, TO BE ENTERED
INTO A PRIZE DRAWING.

SEE REVERSE FOR HOW TO WIN PRIZES

FOR WALKING CHALLENGES, TRAIL MAPS AND RESOURCES, VISIT HEALTHYSHASTAWALKS.ORG

HOW TO WIN PRIZES

All participants who complete and check off at least 10 different walks on the Walks Passport are eligible to be entered into a prize drawing. Participants who black out the passport (complete all 25 walks) will also be entered into a separate drawing for a sporting goods store gift card. Walks cannot be counted twice. All participants must live or work in Shasta County.

By March 1, 2024, all passports must be submitted to admin@healthyshasta.org, or postmarked to Healthy Shasta, 2650 Breslauer Way, Redding, CA 96001.

Prize drawing winners will be notified by March 15, 2024. Prizes must be collected by March 30, 2024, or prizes will be donated to future Healthy Shasta activities.



YOUR INFORMATION

Name: _____

Email: _____

Phone: _____

☐ Male ☐ Female ☐ Non-binary ☐ Prefer Not to Say

Age _____ Zip Code _____

COMMENTS

Please check the appropriate box or boxes for the following questions:

1. Would you like to be added to Healthy Shasta's e-newsletter (sent approximately 1-2 times/month)?

☐ Yes ☐ No

2. While completing the Walks Passport, did you increase the number of days you usually walk?

☐ Yes ☐ No

How much?

☐ Yes, 1 walk/week ☐ Yes, 2-3 walks/week

☐ Yes, 4 or more walks/week

3. Which benefits have you noticed from participating in the Walks Passport? (check all that apply)

☐ Feel better ☐ Have more energy ☐ Sleep better
☐ Connected with someone ☐ Reduced stress

4. Which of these activities will you continue? _____
Tell us about your plans.

5. Is this your first time participating in the Walks Passport?

☐ Yes ☐ No

6. Did you experience any safety issues? If so, scan the QR code and share your story on Street Story.



FOR WALKING CHALLENGES, TRAIL MAPS AND RESOURCES, VISIT [HEALTHYSHASTAWALKS.ORG](https://www.healthyshastawalks.org)