JUST MOVE IT ONEIDA

JMIO Location & Date: _____

T-Shirt Size: _____ ☐ Adult ☐ Youth

Date of Birth ☐☐ / ☐☐ / ☐☐

FIRST NAME MI LAST NAME

ADDRESS (PO Box OR Street Address)

CITY STATE ZIP CODE

1. PHONE NUMBER: _____

2. EMAIL: _____

3. GENDER: ☐ Female ☐ Male

4. AGE GROUP:

☐ 0-18 mo. ☐ 6 yrs.-12 yrs. ☐ 36 yrs.-54 yrs.

☐ 19 mo.-3 yrs. ☐ 13 yrs.-18 yrs. ☐ 55 yrs.-64 yrs.

☐ 4 yrs.-5 yrs. ☐ 19 yrs.-36 yrs. ☐ 65 yrs.-older

5. CHECK ALL THAT APPLY:

☐ Oneida Tribal Member: Enrollment #_____ / descendant

☐ Other Tribal Affiliation: _____

☐ Oneida Tribe Employee: ID#_____ Department _____

☐ Oneida Tribe Employee Family Member: ☐ Spouse ☐ Child

☐ General Public

6. In a typical week, how many days do you do at least 30 minutes of physical activity?

Some examples: walking, hiking, swimming, playing sports, jogging, chopping wood, bike riding or gardening.

☐ None ☐ 2 days ☐ 4 days ☐ 6 days

☐ 1 day ☐ 3 days ☐ 5 days ☐ Everyday

7. On a typical day, how many FRUITS & VEGETABLES do you eat?

0 1 2 3 4 5+

8. On a typical day, how many cans of REGULAR POP or SWEETENED FRUIT DRINKS do you drink? (44 oz. = 3-1/2 cans)

0 1 2 3 4 5+

9. On a typical day, how many hours do you watch TV, play VIDEO GAMES, or use the COMPUTER? (Do not include work or school hours)

0 1 2 3 4 5+

10. COMMENTS:

_____

_____

_____

Thank You!

WAIVER OF RESPONSIBILITY: In consideration of your acceptance of this entry, for myself, heirs, executors, or administrators, I hereby waive and release any and all rights and claims for damage I may have against sponsoring organizations or representatives for any and all injuries sustained by in any activity, including transportation to and from the site of such activity, related directly or indirectly to my participation of said activity. I hereby give my permission for the use and reproduction of video footage, photographs or audio recordings. I understand that any use of my image and/or voice will be for the purpose of health promotion.

Signature _____ Parent / Guardian _____

(Must sign if child is under 18 years old)

JUST MOVE IT is made possible through the commitment and partnership of:
Oneida Health Promotion/Disease Prevention, Oneida Family Fitness, Community Health Nursing, and the Oneida Diabetes Program.