Brought to you by Herview Health Utalk Challenge



HHWC Committee: Linda Scoles, Chairperson

Debbie Hypes Jan Klatt Connie McDaniel

Havasu Out Ualking Late HOWL Walk & Wag April 21

Visit the HCHF website for more information about upcoming activities

Get on Sour Feet!



Under the umbrella of Havasu Community Health Foundation

Located in The Shambles Village 2126 McCulloch Blvd., Unit 7 P O Box 1410 Lake Havasu City, AZ 86405 Phone: 928 453 8190 Fax: 928 453 8236

Walk'n Talk–April, 2016



Vol.9 Issue 04

Howl - Havasu out walking late!!!!

The Howl Walk & Wag is April 21st at Grand Island Park!! Families, friends and friendly dogs are welcome to come out and enjoy the great Lake Havasu evening weather!! Registration starts at 6:00 p.m. and the walk starts at 7:00 pm. The cost is \$10 per person and \$25 for families of 3 or more. Registration flyer is attached. Call the Havasu Community Health Foundation if you have any questions at 928-453-8190.

A big thank you to the Lake Havasu Elks #2399 for the \$1000 donation!! We are so appreciative of this kind act. The money will help us with the free swim day for the Havasu kids on Aug 6th after Havasu Stick-um!

Funnies

I met a friend jogging in the park. Well he was jogging and I was sitting on a bench.

Walker of the month JoEllen (JoJo) Craig

JoEllen (JoJo) Craig is our walker for April! She is 62 years young and has been single 17 years and has a beautiful daughter who is getting married in April!! She worked for 35 years in construction as a heavy equipment operator and retired in 2013. She winters in Lake Havasu and has a home in Puyallup, Washington.



Saturday walks are at 7:00 a.m. in front of the swim area at Rotary Park

JoJo says she has always been athletic and loves working out and tries to do so at least 5 days a week. She has run 5 marathons and 2 small triathlons but had to quit after she hurt her knee in 2007. She has always enjoyed the outdoors and also rides her bike, kayaks, walks and loves hiking in Havasu!! She says she

needs to get her eating habits into the same category as exercising because she loves to exercise. JoJo's knee has been an issue for a long time but when she works out and does squats correctly it helps a lot. She says weights help her to maintain overall body muscle tone. She has belonged to fitness centers since she was 18 and has enjoyed Titan Gym the most!!

JoJo says exercise makes you feel good once you get started, and you will be amazed at the improvements that will happen. She says give it your best try and not overdo it the first time!! So let's try and see what great improvements you will see and **Get On Your Feet!!!**



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www.havasucommunityhealth.org

April, 2016

Community

Corner

Havasu Stick'em

and free swim

day is Aug 6th!

information.

Watch for more



Havasu Health Walk Challenge

Commitites: Linda Scoles, Chairperson Debbie Hypes Jan Klaff Laura Koch Connie McDaniel



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Phone: 928 453 8190





Havasu Out Walking Late

You and all your friends are invited to "Get on Your Feet"

> Thursday, April 21 Registration Starts at 6 pm Walk Starts at 7 pm

Dogs are welcome-come howl at the full moon!

At Grand İsland Park off Malibu Dr. on the island \$10 Per person or \$25 Per Family



Pets are free, but must be accompanied by a human.

Find links to register and pay online at www.havasucommunityhealth.org

A REGISTRATION FORM IS NEEDED FOR EACH PERSON WALKING. FORMS FOR	(musi
CHILDREN UNDER 18 MUST BE SIGNED BY PARENT OR GUARDIAN.	I understand the
Name	event. I am a good physical harmless Hava
Address	Health Walk Ch of their employ
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Phone E-Mail (families must include minimum of one parent or guardian)	
□\$10 for Individual Registration or □\$25 for Family Registration	
Total Paid \$	Signature
Checks should be made payable to HCHF (for Havasu Health Walk Challenge) Mail registration form with payment to HCHF, P O Box 1410, Lake Havasu City, AZ 86405, Or drop it off at the HCHF Office, 2126 McCulloch Blvd., Unit 7, Lake Havasu City, AZ	Signature of F Guardian if ur
	we also

Howi Walk & Wag—REGISTRATION FORM

Waiver and Indemnification (must sign to participate)

I understand that my consent to these provisions is given in consideration for being permitted to participate in this event. I am a voluntary participant in this event and in good physical condition. I hereby release and hold harmless Havasu Community Health Foundation Havasu Health Walk Challenge, the City of Lake Havasu, and any of their employees or volunteers from any claims that I may have arising out of my participation in this event. I give permission to Havasu Community Health Foundation/ Havasu Health Walk Challenge and their sponsors to use any photographs, videotapes or other recordings of me that are made during the course of this event.

Signature of Parent or	Dat
Guardian if under 18 years of age	

Date

Office Use: Cash Ck# ____ CC ____ Date Received: _____ Initials _____ DB ____ Event DB .