



Participant Packet List

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*** REQUESTOR: NGA1252 - GARDNER, NANCYE HUMAN RESOURCES/HUNTSVILLE *
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*** S Y S M O U T B A S K E T P R I N T *
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MESSAGE ID: 341843CCC DATE: 04/10/12 TIME: 08:18am PRIORITY: 000

SUBJECT: CHAIRMAN'S CHALLENGE 2012

TO: WIN REPRESENTATIVES

FROM: NANCYE GARDNER

SUBJECT: 3RD QUARTER CHAIRMAN'S CHALLENGE

LET THE GAMES CONTINUE! THE THIRD QUARTER 2012 CHAIRMAN'S FITNESS CHALLENGE - GET FIT/STAY TRAINED, FOR TDCJ AND WINDHAM EMPLOYEES WILL BE HELD APRIL 16, 2012 THROUGH MAY 20, 2012. LIKE THE SECOND QUARTER CHALLENGE, THE GOAL OF THIS CHALLENGE IS FOR EACH PARTICIPANT TO SUCCESSFULLY COMPLETE THE CHALLENGE EACH WEEK.

MR. LIVINGSTON HAS AUTHORIZED FOUR HOURS OF ADMINISTRATIVE LEAVE FOR FULL TIME EMPLOYEES AND TWO HOURS FOR PART TIME EMPLOYEES WHO SUCCESSFULLY COMPLETE THE FIVE-WEEK PHYSICAL ACTIVITY PROGRAM IN ITS ENTIRETY. WIN REPS SHOULD COMPILER A LIST OF EMPLOYEE NAMES THAT SUCCESSFULLY COMPLETE THE FIVE-WEEK CHALLENGE. THIS LIST SHOULD BE PROVIDED TO THE WARDEN/DEPARTMENT HEAD FOR APPROVAL BY MAY 25, 2012. ONCE THE LIST IS APPROVED, THE WIN REP IS TO KEEP THE ORIGINAL AND PROVIDE A COPY TO THE UNIT/DEPARTMENT HUMAN RESOURCES REPRESENTATIVE. EMPLOYEES MUST UTILIZE THEIR ADMINISTRATIVE LEAVE BETWEEN JUNE 1, 2012 AND MAY 31, 2013 BY SUBMITTING A LEAVE REQUEST. HUMAN RESOURCES REPRESENTATIVES MUST ATTACH A COPY OF THIS EMAIL TO EACH EMPLOYEE'S LEAVE REQUEST.

WIN REPRESENTATIVES, PLEASE BEGIN SIGNING UP PARTICIPANTS TODAY, APRIL 9, 2012. REPORT THE TOTAL NUMBER OF PARTICIPANTS (NUMBER ONLY) TO KATHY BRANNON VIA MAINFRAME EMAIL (KBR2346) BY FRIDAY, APRIL 13, 2012. WHEN AN EMPLOYEE SIGNS UP, PLEASE PROVIDE THEM WITH THE PARTICIPATION AGREEMENT, WAIVER AND INDEMNITY AGREEMENT, THE PARTICIPANTS INFORMATION PAGE (COPY OF THIS EMAIL), AND THE REVISED 3RD QUARTER-SUMMER OLYMPIC GAMES EXERCISE EQUIVALENTS CHART. THESE FORMS ARE LOCATED ON THE WIN WEBSITE.

RULES OF THE CHALLENGE ARE AS FOLLOWS:

1. EMPLOYEES MUST SIGN UP WITH THEIR WIN REPRESENTATIVE BY FRIDAY, APRIL 13, 2012.
2. PARTICIPANTS MUST REPORT THEIR TOTAL WEEKLY POINTS BY THE END OF THE DAY EACH MONDAY FOR THE DURATION OF THE CHALLENGE. IN ORDER TO SUCCESSFULLY COMPLETE THE CHALLENGE, PARTICIPANTS MUST REPORT 200 POINTS PER WEEK.

3. PARTICIPANTS MAY USE ANY OF THE PHYSICAL ACTIVITIES LISTED ON THE 3RD QUARTER-SUMMER OLYMPICS GAMES EXERCISE EQUIVALENTS CHART IN ORDER TO EARN THE REQUIRED 200 POINTS PER WEEK MINIMUM. ONLY THE PHYSICAL ACTIVITIES LISTED ON THE CHART WILL COUNT TOWARD AN EMPLOYEE'S WEEKLY POINTS, BUT BE CREATIVE! (EXAMPLE: IF AN EMPLOYEE CLIMBS STAIRS AT THEIR JOB EVERY DAY THEY MAY USE THAT AS PART OF THE CLIMBING ACTIVITY TO ASSIST THEM IN GETTING THEIR POINTS VALUE FOR THE WEEK.) SINCE SPRING IS HERE AND YARD WORK IS ON EVERYONE'S "TO DO" LIST, WE HAVE ADDED RELATED ACTIVITIES TO THE LIST FOR THIS QUARTER.

ON TUESDAY OF EACH WEEK, THE WIN REPRESENTATIVE MUST REPORT THE TOTAL NUMBER OF PARTICIPANTS (NO NAMES, PLEASE) AND THE TOTAL NUMBER OF POINTS. BY USING A STANDARDIZED REPORTING FORMAT, THIS WILL ENSURE THE CORRECT UNIT OR DEPARTMENT WILL BE CREDITED WITH AN ACCURATE COUNT OF WEEKLY RESULTS. THE REQUESTED REPORTING FORMAT IS PROVIDED BELOW:

WEEK #:
UNIT OR DEPARTMENT NAME
TOTAL NUMBER OF PARTICIPANTS (NO NAMES PLEASE)
TOTAL NUMBER OF WEEKLY POINTS

IF YOU HAVE ANY QUESTIONS REGARDING THIS 3RD QUARTER CHAIRMAN'S CHALLENGE, PLEASE CONTACT ME VIA MAINFRAME EMAIL AT NGA1252 OR BY TELEPHONE AT 936-437-4064, OR KATHY BRANNON BY MAINFRAME EMAIL AT KBR2346 OR BY TELEPHONE AT 936-437-4161.

NANCYE GARDNER
TDCJ WELLNESS COORDINATOR
EMPLOYEE SERVICES SECTION
HUMAN RESOURCES DIVISION
936-437-4064

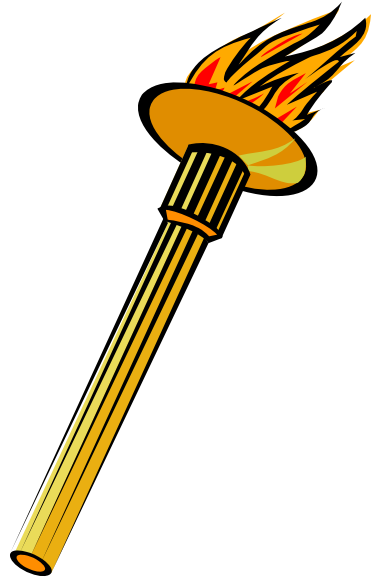
2012 Chairman's Olympic Fitness Challenge Exercise Equivalents

Activity	Actual Miles/Minutes	Points Value
Push-ups	2 minutes – as many as possible	2 points for each push-up
Sit-ups	2 minutes – as many as possible	2 points for each sit-up
Deep Squats	2 minutes – as many as possible	1 point for each deep Squat
Weight Lifting	Per Repetition	1 point
Yoga/Stretching	30 minutes	10 points
Walking, briskly (3-4mph)	2 miles	10 points
Running (5.5mph)	1 mile	15 points
Cycling/Mountain Biking (13 mph)	5 miles	10 points
Spinning	30 minutes	10 points
Aerobics/Zumba	30 minutes	10 points
Stairmaster	30 minutes	10 points
Rollerblading	3 miles	10 points
Swimming	250 meters/5 laps in an Olympic pool	10 points
Dancing, moderate to rapid	30 minutes	10 points
Team Sports	30 minutes	10 points
Gardening (digging, planting, weeding, etc.)	30 minutes	10 points
Yard Work (mowing, trimming, edging, etc.)	30 minutes	10 points
Gym workout	30 minutes	10 points
Climbing stairs	30 minutes	10 points
Spring Cleaning (or heavy housework)	30 minutes	10 points

The exercise equivalents were developed so participants who enjoy activities in addition to walking can log credit for those different activities. The exercise values have been estimated by average caloric burn for a 150-pound person exercising at moderate intensity levels for 30 minutes. The primary goal of the Chairman's Fitness Challenge is to encourage people to participate in regular physical activity to increase overall health.

Remember to be creative. Climbing stairs may include climbing stairs at your job. Walking may include the number of steps you take in a day. Walkers may wear a pedometer all day and report their total miles for the day by dividing their steps by 2000.

Weekly Activity Log



WEEKLY GOAL:

2012 Chairman's Olympic Fitness Challenge Exercise Equivalent

200 Points Per Reporting Period Required
Monday:
Tuesday:
Wednesday:
Thursday:
Friday:
Saturday:
Sunday:



TDCJ Wellness Initiative Now **Participation Agreement**

Please read each of the following statements carefully and initial in the space provided. Your signature at the bottom of this form represents your acknowledgement and understanding of the guidelines set forth in this document.

I desire to voluntarily participate in the programs and/or use the facilities and equipment provided by the TDCJ Wellness Initiative Now for the purpose of personal fitness. In consideration of the right and privilege of being permitted to participate in these programs and/or to have access to and the use of said facilities and equipment:

_____ I do hereby agree to the conditions set forth herein and acknowledge that the voluntary participation in any programs and/or access to and use of facilities and equipment is not a condition of employment, is not related to my employment and therefore, should any injury occur as a result of my participation in the aforesaid programs and/or use of facilities and equipment, such injuries will not be covered by workers' compensation.

_____ I acknowledge that I am fully aware that there may be risks for certain individuals participating in activities involving physical exertion.

_____ I acknowledge that whether I consult my physician before participating in these activities is my decision.

_____ I agree to withdraw from the programs and/or discontinue use of these facilities and equipment should I become aware by any means whatsoever that participation is medically contraindicated.

_____ I agree to notify the unit/department wellness representative if I detect any hazards or defects in any of the facilities or equipment to which I am allowed access for these activities.

_____ I agree to accept full responsibility for any injuries sustained while participating in a fitness program or using facilities and equipment made available for that purpose

I acknowledge and affirm that I have carefully read the guidelines and have obtained a satisfactory explanation of any part thereof that I do not understand.

Printed Name

Participant Signature

Unit/Department

Date

Date of Birth (mm/dd)

WIN Representative/Team Captain



TDCJ Wellness Initiative Now
Waiver and Indemnity Agreement

I, _____, in order to use any premises or equipment belonging to TDCJ and to participate in the Wellness Initiative Now Program, do hereby release the Texas Department of Criminal Justice, its agents and employees, the Texas Board of Criminal Justice, and the State of Texas, its agents, employees, and political subdivisions thereof, from any claims, actions, litigation (to include attorneys' fees), and responsibility of liability for any injuries, illness, disability or death that may arise, directly or indirectly, from my use of any fitness room or equipment belonging to TDCJ or otherwise participating in the Wellness Initiative Now Program.

In addition, I agree to hold harmless and indemnify the Texas Department of Criminal Justice, its agents and employees, the Texas Board of Criminal Justice, and the State of Texas, its agents, employees, and political subdivisions thereof, from any costs, claims, actions, litigation (to include attorney's fees) arising, directly or indirectly, from my use of any premises or equipment belonging to TDCJ or my participation in the Wellness Initiative Now Program with respect to damage to property and injury to other persons.

Employee Signature

Date