

## ACTION for ENERGY 10 Day Challenge! Change Habits to Reduce Energy Use and Save Money!

<b>ACTION FOR ENERGY 10 DAY CHALLENGE - EASY!</b>	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7	DAY 8	DAY 9	DAY 10
<b>DATE:</b>										
I walked or biked to my school										
We turned off half of our classroom lights.										
If you went to a drive thru: We turned off the engine while waiting in line.										
I turned off my bedroom lights before leaving the room.										

<b>ACTION FOR ENERGY 10 DAY CHALLENGE - INTERMEDIATE</b>	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7	DAY 8	DAY 9	DAY 10
<b>DATE:</b>										
I cut my screen time use by half!										
We used a clothesline instead of the dryer.										
I packed my lunch in re-useable containers.										
I unplugged appliances that were not in use (hair dryer, toaster, etc.)										

<b>ACTION FOR ENERGY 10 DAY CHALLENGE - TOUGH!</b>	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7	DAY 8	DAY 9	DAY 10
<b>DATE:</b>										
My family ate only unprocessed, whole foods today.										
I visited a local business to encourage them to recycle.										
Winter: I turned down the heat. Summer: I turned off the A/C.										
I wrote a letter to my mayor, MLA, Reeve or MP asking them to initiate changes in policy regarding green house gas emissions.										

Register your team (individual, family or classmates) to take our 10 day challenge:

You may choose to do 4, 8 or all 12 of the challenges as a family, individual or class! Put a check mark beside each day that your team was able to complete the challenge (✓). Once you have completed the ten day challenge, send it to [outreach@epbrparks council.org](mailto:outreach@epbrparks council.org)! We can calculate the Green House Gas Emissions that you were able to prevent from entering the atmosphere for the first section of challenges! If you have questions, contact us at 780-898-7275.

***This 10 Day Challenge was completed by:***

- o Individual : \_\_\_\_\_, contact email: \_\_\_\_\_
- o Family: \_\_\_\_\_, contact email: \_\_\_\_\_
- o Team: \_\_\_\_\_, contact email: \_\_\_\_\_
- o Classroom: School \_\_\_\_\_ City/Town: \_\_\_\_\_
- Grade \_\_\_\_\_ Contact name/email: \_\_\_\_\_

