Physical Education and Fitness Activity Log

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Week of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Monday \_\_\_/\_\_\_ | Tuesday \_\_\_/\_\_\_ | Wednesday \_\_\_/\_\_\_ | Thursday \_\_\_/\_\_\_ | Friday \_\_\_/\_\_\_ | Saturday \_\_\_/\_\_\_ | Sunday \_\_\_/\_\_\_ |
| Activity: | Activity: | Activity: | Activity: | Activity: | Activity: | Activity: |
| Parent Signature: | Parent Signature: | Parent Signature: | Parent Signature: | Parent Signature: | Parent Signature: | Parent Signature: |

\*Please complete and return to Mr. Parkes or Ms. Childs at school every Monday\*

\*\*Write down the specific activity you completed and for how long\*\*

For example, soccer for 30 minutes, basketball for 20 mins, or jump roping for 10 minutes