

EXTRACURRICULAR

FITNESS LOG

Name: _____

Class: _____

Term: _____

Due Date: _____

Date
(three different days)

Activity

Time
(>15min)

	Date (three different days)	Activity	Time (>15min)
Week 1			
Week 2			
Week 3			
Week 4			

Parent/Guardian Signature

- /12 Activity 3x per week
- /4 Minimum 15min per activity
- /4 Parent/Guardian Signature

/20 Comments