

Physical Activity Log



Name: _____

For one week, record the physical activity you do each day. Write how it felt to do the physical activity. Return this log with your own and your parent's or guardian's signatures by _____ (date).

Day	Physical activity	How it felt
Sample day	Riding bike	Really good
	Stretching	A little tight
Day 1		
Day 2		
Day 3		

Physical Activity Log *(continued)*

Day	Physical activity	How it felt
Day 4		
Day 5		
Day 6		
Day 7		

Child _____ Date _____

Parent/Guardian _____ Date _____