

Name _____

Add MOVE to Your Day

Write or draw how you can MOVE in the morning, at school, at home, and other times during your day.

Morning

School

Home

You Choose: _____





MOVE Tracker

| How did I MOVE? <i>Write or draw ways you MOVE each day.</i> | Day | How long did I MOVE? <i>Color one square for each 10 minutes of physical activity.</i> | | | | | | | | | |
|---|-----------|---|----|----|----|----|----|----|----|----|------|
| | | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100+ |
| | Monday | | | | | | | | | | |
| | Tuesday | | | | | | | | | | |
| | Wednesday | | | | | | | | | | |
| | Thursday | | | | | | | | | | |
| | Friday | | | | | | | | | | |
| | Saturday | | | | | | | | | | |
| | Sunday | | | | | | | | | | |



MOVE Tracker

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| | Friday | | | | | | | | | | |
| | Saturday | | | | | | | | | | |
| | Sunday | | | | | | | | | | |