

Name _____

Train Your Brain

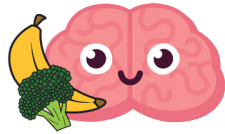
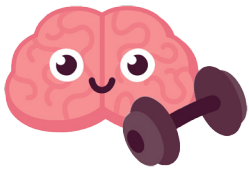
Record each time you make a *fit* choice by writing or drawing what you did in the column that best represents how you helped your brain.

MOVE

FOOD

RECHARGE

MOOD



MOVE	FOOD	RECHARGE	MOOD

