

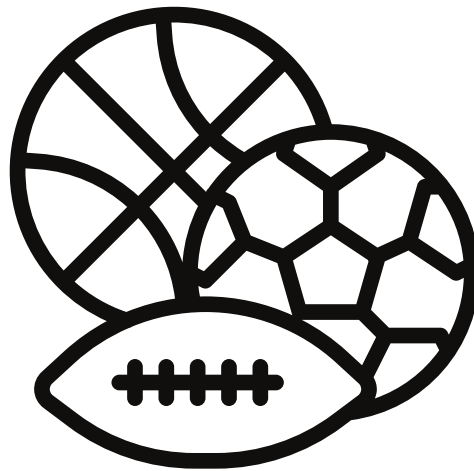
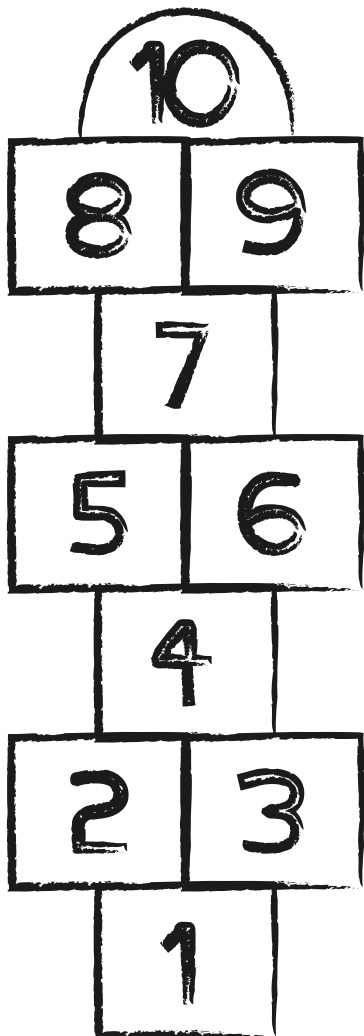
Name: _____

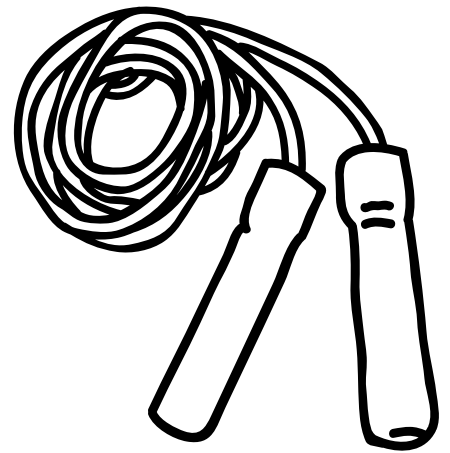
I, _____, will do 3 hours of
(Your Name)

activity each week for the next 5 weeks
of the FoodRight program.

*1 hour of physical activity is recommended daily

Color & label each activity.





Activity Log

Type of activity

Write or Draw what you did

Time spent



Week 1:

Week 2:

Week 3:

Activity Log

Type of activity Write or Draw what you did	Time spent
Week 4:	
Week 5:	
Favorite Activity: Write or Draw	Add up your total hours of activity:



Last Day: I completed _____ total hours of activity.

If 3 hours a week for each week is completed, YOU can win prizes!