

**Name:** \_\_\_\_\_ **School:** \_\_\_\_\_

I, \_\_\_\_\_, will completed 3  
*(Your Name)*

hours of physical activity each week for  
the next 4 weeks of the FoodRight  
program.

\*1 hour of physical activity is recommended daily

Below, draw and color in your favorite physical  
activity to do in the summer:

# Activity Log

**Type of activity**  
Write or Draw what you did

**Time spent**



Week 1:

Week 2:

Last Day: I completed \_\_\_\_\_ total hours of activity.

# Activity Log

Name: \_\_\_\_\_

If 3 hrs/week is completed, you will win prizes!  
Additional prize for students with most activity  
hours at the end of the program.

Month: \_\_\_\_\_

Week	Monday	Tuesday	Wednesday	Thursday	Friday	Weekend
1						
2						