



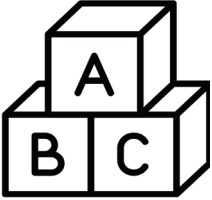











# WEEK #3 TRACKER

Name: \_\_\_\_\_ Team/School: \_\_\_\_\_

	March 16	March 17	March 18	March 19	March 20	March 21	March 22
<b>Check off each day you are active in the boxes below. Any activity counts!</b>							
<input checked="" type="checkbox"/>	<input type="checkbox"/> Training Tuesday	<input type="checkbox"/> Wellness Wednesday	<input type="checkbox"/> Turn It Up Thursday	<input type="checkbox"/> Feel Good Friday	<input type="checkbox"/> Strength Saturday	<input type="checkbox"/> Stride Sunday	<input type="checkbox"/> Mindfulness Monday
SONC Activity	<b>Jump for joy!</b> Today, we're working on our jumping skills! 	<b>Happy St. Patrick's Day!</b> Let's make <b>Ants on a Log!</b> What did you make yours with? 	<b>Morning, noon and night</b> exercise - try the advanced option, if you feel up to it! 	Start and end the day <b>feeling good</b> with morning and night stretch sessions! 	<b>Alphabet Challenge!</b> What's your favorite fruit or vegetable? _____ 	<b>The Hits List</b> - Walk, or run! 	<b>Let's try a yoga flow!</b> 
Did you do something different? Write it here.							
Did you Power Up by completing the half plate challenge?	Yes I did!  <input type="checkbox"/>	Yes I did!  <input type="checkbox"/>	Yes I did!  <input type="checkbox"/>	Yes I did!  <input type="checkbox"/>	Yes I did!  <input type="checkbox"/>	Yes I did!  <input type="checkbox"/>	Yes I did!  <input type="checkbox"/>

At the end of the week, share your tracker with your teacher/coach.