

Name: _____ Class/Team: _____

Activity (walk/run/cycle/swim/playground etc): _____ Enjoyment: 😊 😐 😞

How long for: _____ hours _____ mins _____ Effort: Felt Fine/Breathed Harder/Hot and Sweaty

Who else took part from your family? Adults: _____ Other children: _____ WELLDONE!!!



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