Name Class Period Teacher

	Minutes spent active	What was the activity and where? (on treadmill, around block, at a park, etc)	Heart Rate at the start	Heart Rate when finished
Date:	Start::: Finish::: Total Min:		bpm	bpm
Date:	Start::		bpm	bpm
Date:	Total Min:: Start:::			
Date:	Total Min::		bpm	bpm
	Finish::: Total Min:		bpm	bpm
Date:	Start::: Finish::: Total Min:		bpm	bpm
Date:	Start::		bpm	bpm
Date:	Total Min:: Start:::			
	Total Min:		bpm	bpm

Date:	Start::		
	Finish::	bpm	bpm
	Total Min:		
Date:	Start::		
	Finish::	bpm	bpm
	Total Min:	•	
Date:	Start::		
	Finish::	bpm	bpm
	Total Min:	•	·
Date:	Start::		
	Finish::	bpm	bpm
	Total Min:	•	
Date:	Start::		
	Finish::	bpm	bpm
	Total Min:	•	·
Date:	Start::		
	Finish::	bpm	bpm
	Total Min:		

TOTAL AMOUNT OF MINUTES from Week 0-2 _____