



# Log Sheet

Participant's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_ Grade/Teacher: \_\_\_\_\_

My goals for increasing physical activity this week  
(eg. Meet friends at the park for a game of tag or soccer, walk to school):

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On the graph, please colour or shade in how much time you spent on physical activity and viewing screens (outside school hours) every day for one week. Screen time includes watching TV, playing computer and video games, sending text messages, chatting on Facebook, etc.

**Please note: Screen activities that are active like Wii Fit go under Physical Activity.**

Parent Signature: \_\_\_\_\_

	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		WEEKLY TOTAL	
MORE THAN 4 hrs																
4 hrs																
3 ½ hrs																
3 hrs																
2 ½ hrs																
2 hrs																
1 ½ hrs																
1 hrs																
½ hr																
0 hrs																
	PHYSICAL ACTIVITY	SCREEN TIME														

Please return completed log sheets to your teacher

